

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126761

Entity Name: CORILEX TRUCKING, CO.

FILED  
Apr 27, 2008  
Secretary of State

## Current Principal Place of Business:

19 RYBAR LANE  
PALM COAST, FL 32164 US

## New Principal Place of Business:

## Current Mailing Address:

800 BELLE TERRE PARKWAY  
SUITE 200 PMB 203  
PALM COAST, FL 32164 US

## New Mailing Address:

FEI Number: 26-1474640      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LICUL, EVELINA  
19 RYBAR LANE  
PALM COAST, FL 32164 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete  
Name: LICUL, MORENO  
Address: 19 RYBAR LANE  
City-St-Zip: PALM COAST, FL 32164 US

Title: ST ( ) Delete  
Name: LICUL, EVELINA  
Address: 19 RYBAR LANE  
City-St-Zip: PALM COAST, FL 32164 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELINA LICUL

ST

04/27/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date