

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000102740

Entity Name: RELOAD TRUCKING INC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13157 PHOENIX WOODS LANE  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

13157 PHOENIX WOODS LANE  
ORLANDO, FL 32824

**New Mailing Address:**

FEI Number: 27-3750309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAX CARE, INC.  
417 CENTER POINTE CIRCLE STE. 1737  
ALTAMONTE SPRINGS, FL 32701 US

**Name and Address of New Registered Agent:**

TAX CARE, INC.  
417 CENTER POINTE CIRCLE  
STE. 1737  
ALTAMONTE SPRINGS, FL 32701 US

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: MOISES ALVAREZ

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P, T  
Name: DE LA CRUZ, LUIS P  
Address: 13157 PHOENIX WOODS LANE  
City-St-Zip: ORLANDO, FL 32824

I hereby 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 all other like empowered.

SIGNATURE: LUIS DE LA CRUZ

P, T

04/29/2011

Electronic Signature of Signing Officer or Director

Date