

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P94000000312

1. Entity Name

W.R.B. TRUCKING, INC.



FILED

Jan 27, 2005 08:00 AM  
Secretary of State

2. Current Place of Business

637 22ND STREET  
ORLANDO FL 32805

Mailing Address

637 22ND STREET  
ORLANDO FL 32805

3. Current Mailing Address

3. Mailing Address

4. State

Suite Apt #, etc

City & State

City & State

Country

Country

Zip

Country

4. FEI Number

59-3214627

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEASLEY, RANDY  
637 22ND STREET  
ORLANDO FL 32805

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with and accept the obligations of registered agent.

Signature of

Registered Agent

(NOTE: Registered Agent signature required when reinstating)

Date

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

PD  
BEASLEY, RANDY  
637 22ND STREET  
ORLANDO FL 32805 ☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP  
01/28/05-80002-002 158.75 ☐ Change ☐ Addition

STD  
BEASLEY, WILLIAM N  
637 22ND STREET  
ORLANDO FL 32805 ☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP ☐ Change ☐ Addition

☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP ☐ Change ☐ Addition

☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP ☐ Change ☐ Addition

☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP ☐ Change ☐ Addition

☐ Delete

NAME  
STREET ADDRESS  
CITY, ST, ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature of Officer or Director

*Randy Beasley* Randy BEASLEY 1-25-05-407-648-2005