## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 20, 2006 08:00 AM **DOCUMENT # P94000043944 Secretary of State** HARD TIMES TRUCKING, INC. Mailing Address Principal Place of Business 1519 EAST PONDEROSA RD. 1519 EAST PONDEROSA RD. FORT WALTON BEACH, FL 32547 FORT WALTON BEACH, FL 32547 02162006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3248319 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FLEISCHMAN, DEBORAH F DO NOT WRITE 1519 EAST PONDEROSA RD. FORT WALTON BEACH, FL 32547 IN THIS SPACE 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, hypother product name of represented agent and life if applicable DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees. 10. OFFICERS AND DIRECTORS PST WILE FLEISCHMAN, DEBORA F KAME 1519 E. PONDEROSA RD. STREET ADDRESS FT WALTON BEACH, FL 32547 OTY-51-27 UUUUUU4389UU TITLE 03/01/06-80024-012 150.00 WAE STREET ADDRESS CITY-ST-77P THE XXXI STREET ADDRESS DO NOT WRITE CITY-ST- 21P IN THIS SPACE IME 红红莲 STREET ADDRESS COTY-ST-ZP

12. I hereby certify that the information supplied with this filtro does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cett; that I am an officer or director of the corporation or the receiver or instee empowered to execute this export 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:

MANUE STREET ADDRESS COTY-SE-TP

NAME STREET ADDRESS ONLY-SZ-70°

SCHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

216.00

880)8623847

**FILED**