


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 04, 2006 -08:00 AM-**  
**Secretary of State**

<b>DOCUMENT # P95000016783</b> 1. Entity Name <b>JOE'S AIR FREIGHT PICKUP AND DELIVERY SERVICES, INC.</b>	
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Principal Place of Business <b>3708 CR 547N DAVENPORT, FL 33837</b>	Mailing Address <b>3708 CR 547N DAVENPORT, FL 33837</b>
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05022006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3300535</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>SCHWEBEL, MARTIN D 337 N. FERN CREEK AVE. ORLANDO, FL 32803</b>
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**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TP YATES, JOE E 3708 CR 547N DAVENPORT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YATES, MARK S 3708 C.R. 547 N DAVENPORT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAINES, MILDRED 3708 C.R. 547 N DAVENPORT, FL
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05/19/06-80020-013 150.00

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12. I hereby certify that the information supplied with this filing 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 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:**  **JOE E. YATES** **5-2-06** **407-240-4888**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #