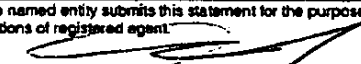


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

02-07-2005 90072 039 ***150.00

DOCUMENT # P95000026239																																																																																																																																			
1. Entity Name T & T TRUCK SERVICE, INC.																																																																																																																																			
Principal Place of Business 3080 SW 111 AVE MIAMI FL 33165			Mailing Address 3080 SW 111 AVE MIAMI FL 33165																																																																																																																																
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Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																																																
City & State			City & State																																																																																																																																
Zip	Country	Zip	Country	4. FEI Number 65-0571059																																																																																																																															
				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																																																																																																																															
TARRAGO, ALCIDES L 2931 S.W. 108TH AVENUE MIAMI FL 33165				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  DATE 2/28/05 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)																																																																																																																																			
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																																																																																																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3">10. OFFICERS AND DIRECTORS</th> <th colspan="3">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> </thead> <tbody> <tr> <td>TITLE</td> <td>PVD</td> <td>☐ Delete</td> <td>TITLE</td> <td>PVD</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>TARRAGO, ALCIDES L</td> <td></td> <td>NAME</td> <td>TARRAGO, ALCIDES</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2931 S.W. 108TH AVENUE</td> <td></td> <td>STREET ADDRESS</td> <td>3080 SW 111 AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI FL 33165</td> <td></td> <td>CITY-ST-ZIP</td> <td>MIAMI FL 33165</td> <td></td> </tr> <tr> <td>TITLE</td> <td>STD</td> <td>☐ Delete</td> <td>TITLE</td> <td>STD</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>TARRAGO, OLGA L</td> <td></td> <td>NAME</td> <td>TARRAGO OLGA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2931 S.W. 108TH AVENUE</td> <td></td> <td>STREET ADDRESS</td> <td>3080 SW 111 AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI FL 33165</td> <td></td> <td>CITY-ST-ZIP</td> <td>MIAMI FL 33165</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </tbody> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PVD	☐ Delete	TITLE	PVD	☒ Change ☐ Addition	NAME	TARRAGO, ALCIDES L		NAME	TARRAGO, ALCIDES		STREET ADDRESS	2931 S.W. 108TH AVENUE		STREET ADDRESS	3080 SW 111 AVE		CITY-ST-ZIP	MIAMI FL 33165		CITY-ST-ZIP	MIAMI FL 33165		TITLE	STD	☐ Delete	TITLE	STD	☒ Change ☐ Addition	NAME	TARRAGO, OLGA L		NAME	TARRAGO OLGA		STREET ADDRESS	2931 S.W. 108TH AVENUE		STREET ADDRESS	3080 SW 111 AVE		CITY-ST-ZIP	MIAMI FL 33165		CITY-ST-ZIP	MIAMI FL 33165		TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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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 filers empowered.																																																																																																																																			
SIGNATURE:  DATE 4/3/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																			