2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000103864

1. Entity Name
ALAG TRUCKING, INC.

Principal Place of Business	Mailing Address
1591 TIMBERLAKE DRIVE FT PIERCE, FL 34947	1591 TIMBERLAKE DRIVE FT PIERCE, FL 34947

DO NOT WRITE IN THIS SPACE

01202006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0717628	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEE, ALBERT
1591 TIMBERLAKE DRIVE
FT PIERCE, FL 34947

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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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

02/08/06-80044-011 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	LEE, ALBERT
STREET ADDRESS	1591 TIMERLAKE DR
CITY-ST-ZIP	FT. PIERCE, FL 34947

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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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: _____   1/27/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #