2006 FOR PROFIT CORPORATION

FILED . ANNUAL REPORT Apr 28, 2006 08:00 AN Secretary of State DOCUMENT # P97000024586 1. Entity Name ROSÉ'S HAULING, INC. Principal Place of Business Mailing Address 2981 NE 12TH TERRACE 2981 NE 12TH TERRACE POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 04262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0733346 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ROSE, ALBERT G 2981 NE 12TH TERRACE POMPANO BEACH, FL 33064 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PTD TITLE ROSE, ALBERT G NAME STREET ADDRESS 2981 NE 12TH TERRACE CITY-ST-ZIP POMPANO BEACH, FL 33064 TITLE U00000540855 NAME 05/10/06-80034-015 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the Information supplied with this filling 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.

NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP

NTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26, 2006