2007 FOR PROFIT CORPORATION

Apr 16, 2007 8:00 am **ANNUAL REPORT** Secretary of State **DOCUMENT # P97000077883** 04-16-2007 90085 038 ***158.75 1. Entity Name ALEX-LOWE TRUCKING, INC. Principal Place of Business Mailing Address 40063051 2474 NW 112TH STREET **2474 NW 112TH STREET** MIAMI, FL 33167 MIAMI, FL 33167 01162007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0780791 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOWE, NEHEMIAH A DO NOT WRITE **2474 NW 112TH STREET** MIAMI, FL '33167 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 little if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PSTD TITLE LOWE, NEHEMIAH A NAME STREET ADDRESS **2474 NW 112TH STREET** MIAMI, FL 33167 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP

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 it 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NEHEMIAH A LOWE

FILED