

2006 FORT PROUD CORPORATION  
ANNUAL REPORT

**FILED**  
**May 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT #P98000035996**

1. Entity Name  
**ISLAND TRUCKING, INC.**



Principal Place of Business  
**6500 FRONT ST.  
KEY WEST, FL 33040**

Mailing Address  
**P.O. BOX 2744  
KEY WEST, FL 33045**



05202006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0859026** Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**GONZALEZ, IRENE  
6500 FRONT STREET  
STOCK ISLAND  
KEY WEST, FL 33040**

**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, and I am familiar with, and accept the obligations of registered agent.

05/24/06-80002-017 150.00

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  
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	P GONZALEZ, IRENE P. O. BOX 2744 KEY WEST, FL 33045
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GONZALEZ, CECILIA P.O. BOX 2744 KEY WEST, FL 33045
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**DO NOT WRITE  
IN THIS SPACE**

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, changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Cecilia Gonzalez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/06 (305) 292-136  
Date Daytime Phone #