## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: \*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

## Mar 17, 2005 08:00 AM Secretary of State DOCUMENT # P98000040155 1. Entity Name S.O.S. TRUCKING INC. Principal Place of Business Mailing Address 148 HICKORY HAMMOCK RD. 148 HICKORY HAMMOCK RD. LAKE WALES, FL 33853 LAKE WALES, FL 33853 03032005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 59-3521757 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent O'CONNOR, SUSAN DO NOT WRITE 148 HICKORY HAMMOCK RD. LAKE WALES, FL 33853 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PVST** TITLE O'CONNOR, SUSAN NAME STREET ADDRESS 148 HICKORY HAMMOCK RD. CITY-ST-ZIP LAKE WALES, FL 33853 U00000266003 73717705-80012-024 150.00 TITLE NAME 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 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

FILED