

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000088522

FILED
Apr 29, 2004
Secretary of State

Entity Name: MR. BILL'S TRUCK LINE, INC.

Current Principal Place of Business:

3610 SW 45 AVENUE
HOLLYWOOD, FL 33023

New Principal Place of Business:

C/O C. FOREST 1900 W. COMMERCIAL BLVD
103
FT LAUDERDALE, FL 33309

Current Mailing Address:

% ASSOCIATES ACCOUNTING
PO BOX 590910
FT. LAUDERDALE, FL 333550910

New Mailing Address:

FEI Number: 65-9811020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, WILLIAM B
3610 SW 45 AVENUE
HOLLYWOOD, FL 33023

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVSD () Delete
Name: EDWARDS, WILLIAM B
Address: 3610 SW 45 AVENUE
City-St-Zip: HOLLYWOOD, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD (X) Change () Addition
Name: EDWARDS, WILLIAM B
Address: C/O C. FOREST 1900 W. COMMERCIAL BLVD #10
City-St-Zip: FT LAUDERDLE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM B. EDWARDS

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04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date