

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000075386**  
 1. Entity Name  
 NEXTCONVEYOR, CORP.



Principal Place of Business  
 5100 WEST HANNA AVE  
 TAMPA, FL 33634

Mailing Address  
 5100 WEST HANNA AVE  
 TAMPA, FL 33634

**DO NOT WRITE IN THIS SPACE**



02092007 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-3592680

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

KUMAR, ROGER  
 5100 WEST HANNA  
 TAMPA, FL 33634

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WRIGHT, CAROLE 5100 WEST HANNA TAMPA, FL 33634
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KUMAR, ROGER 5100 W. HANNA TAMPA, FL 33634
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000632155  
 02/21/07-80010-015 150.00

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

SIGNATURE: Carole R Wright, sec/Treas 2/9/07 813-878-2250  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #