


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000086214
 1. Entity Name
 D.N.N. TRUCKING, INC.



Principal Place of Business
 10600 N.W. SOUTH RIVER DRIVE
 MEDLEY, FL 33178

Mailing Address
 10600 N.W. SOUTH RIVER DRIVE
 MEDLEY, FL 33178



01212006 No Chg-P CR2E034 (11/05)

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4. FEI Number
 65-0951769 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HERNANDEZ, AMADO
 13598 S.W. 21ST STREET
 MIRAMAR, FL 33027

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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, 2006 Fee will be \$550.00

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

100000403647
 02/06/06-80015-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	HERNANDEZ, AMADO
STREET ADDRESS	13598 SW 21ST STREET
CITY-ST-ZIP	MIRAMAR, FL 33027
TITLE	SVD
NAME	HERNANDEZ, LEIDY
STREET ADDRESS	13598 SW 21ST STREET
CITY-ST-ZIP	MIRAMAR, FL 33027
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: [Signature] President 1/24/06 305-883-4887
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #