


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2005 08:00 AM
Secretary of State

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| DOCUMENT # S36822 1. Entity Name AFC TRUCKING, INC. |  |
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| Principal Place of Business POST OFFICE BOX 22862 FT. LAUDERDALE, FL 33335 US | Mailing Address POST OFFICE BOX 22862 FT. LAUDERDALE, FL 33335 US |
|---|---|

DO NOT WRITE IN THIS SPACE



03152005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0248171 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

ROCCASANO, ROSE MARIE
1821 LEE STREET
HOLLYWOOD, FL 33020

**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. 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) DATE

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|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD RAUDEBAUGH, DAVID 11561 NW 26ST FORT LAUDERDALE, FL 33323 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | STD RAUDEBAUGH, CHRISTINE M. 11561 NW 26ST FORT LAUDERDALE, FL 33323 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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04/04/05-80080-005 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | March 28, 2005 <small>Date</small> | 954 463 8816 <small>Daytime Phone #</small> |
|---|--|---|