2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Feb 15, 2006 08:00 AM Secretary of State DOCUMENT # V32119 G. PYLE TRANSPORTATION, INC. Principal Place of Business Malling Address 19150 NE 17TH PL 19150 NE 17TH PL WILLISTON, FL 32696 WILLISTON, FL 32696 1112 No Chg-P CR2E034 (11/05) 01292008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0364955 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PYLE, LILLIAN C DO NOT WRITE 19150 NE 17TH PL WILLISTON, FL 32698 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Bo FILE NOW!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE PYLE, GREGORY NAME STREET ADDRESS 19150 NE 17TH PL #00000438003 02/28/06-60071-609-150.00 CITY-ST-ZIP WILLISTON, FL. 32698 TITLE NAM STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP MAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 1 if the changed, or on an attachment with an address, with all other like empowered. 3525255818 SIGNATURE:

STREET ADDRESS City-SI-DP