

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
 99 FEB -1 PM 12:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # M55810

1. Corporation Name
H & J ASPHALT, INC.

Principal Place of Business 4310 N.W. 35TH AVE MIAMI FL 33142-4323	Mailing Address 4310 N.W. 35TH AVE MIAMI FL 33142-4323
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

9. Name and Address of Current Registered Agent

**LORENZO, HUMBERTO
 4310 N.W. 35 AVE.
 MIAMI FL 33142**

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
 Signature, typed or printed name of registered agent and, if applicable, (SOLE) Registered Agent or, if applicable, (PARTIAL) Registered Agent

12. OFFICERS AND DIRECTORS		
TITLE	D	[] DELETE
NAME	LORENZO, MAGALY	
STREET ADDRESS	7891 S.W. 88TH CT	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	[] DELETE
NAME	HUMBERTO, LORENZO J	
STREET ADDRESS	1362 SW 99 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	[] DELETE
NAME	LORENZO, JORGE	
STREET ADDRESS	7891 SW 88 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	4000002769234-8	[] Change [] Addition
12 NAME	-02/09/99--01046--001	
13 STREET ADDRESS	****150.00 ****150.00	
14 CITY-ST-ZIP		
21 TITLE	4000002769234--8	[] Change [] Addition
22 NAME	-02/09/99--01046--002	
23 STREET ADDRESS	*****8.75 *****8.75	
24 CITY-ST-ZIP		
31 TITLE		[] Change [] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[] Change [] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[] Change [] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[] Change [] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of justice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND TYPED PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

JORGE LORENZO 1/28/99 305-638-8110

CR2E034 (1/198)