2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # M55810 1. Entity Name H & J ASPHALT, INC.								Mar 10, 2004 08:00 AM Secretary of State						
Principal Place o	of Rusiness		Mailing Addre	200										
Principal Place of Business Mailing Address 4310 N.W. 35TH AVE 4310 N.W. 35TH AVE														
MIAMI FL 3314	42-4323	MIAMI FL 33142-4323												
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2. Principal Plac	ce of Busin	3. Mailing Address												
C	-1-	Suite, Apt #, etc.						1 125/2211 101 BILL			() B1801 B1811 B1811	31311231	. 11 1MM)	
Suite, Apt. #, etc.			Suite, Apr. #, etc.						MOO	RE	CR2E03	34 (11/03)		
City & State			City & State				4. FE	Number 65-	002432				ed For	
Zip Country			Zip Country			trv						\$8.75		pplicable
2,0	Coursey				000,,			5. Cer	tificate of Statu	s Desired	X	Fee Requ		.rsai
	6. Name	Registered Agent			\$1	7. Name and Address of New Registered Agent					d Agent			
LORENZO, HUMBERTO						Name								
4310	N.W. 35				Street Address (P.O. Box Number is Not Acc				Acceptabl	e)				
MIAM	II FL 33													
						City				···	F	Z _i p C	ode	
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the obligation			or the purpose or	sidinging to t	-cgiotot	Ja 31,100 31 11	09/0/0/0	ou agun	.,	-	J., J.	arqua m		J 40000
SIGNATURE														
Sig	gnature, typed	or printed name at registered agen	and title if applicable	STONS	Registere	d Agent signature	e required t	when reinst	ating)		DATE			
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Bo												May Be		
7		4 Fee will be \$550.00 Florida Department o	of State							Contributio		☐ Ādi	ded to	Fees
10.		OFFICERS AND			11.			ADDI	TIONS/CHANC	ES TO OF	ICERS A	ND DIRECTO	ORS II	V 11
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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 of director of the corporation or the receiver or trustee emplowered 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 otherwise emplowered.													mation director lock 11 if	
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SIGNATU	JRE: _	SIGNATURE AND THREE OR	DEGREE OF SIG	-			20	UK	<u> </u>	<u> </u>		Sautore Phon	<u> </u>	<u> </u>

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