

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90207 035 \*\*\*158.75

**DOCUMENT # 372050**

1. Entity Name  
J. S. & G. ASPHALT, INC.



Principal Place of Business  
3328 S.W. 46 AVE.  
FT LAUDERDALE, FL 33314

Mailing Address  
3328 S.W. 46 AVE.  
FT LAUDERDALE, FL 33314

60001090



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number  
59-1379276

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAWKES, ROGER T  
3328 S.W. 46 AVENUE  
FORT LAUDERDALE, FL 33314

Name *PATRICIA FUSCILE*

Street Address (P.O. Box Number is Not Acceptable)

*3328 SW 46 AVENUE*

City *FT LAUDERDALE*

FL

Zip *33314*

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007, Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME SESSA, RALPH C.  
STREET ADDRESS 3328 S.W. 46 AVE.  
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE *PRESIDENT, VICE PRESIDENT* ☒ Change ☐ Addition  
NAME *SECRETARY, DIRECTOR*  
STREET ADDRESS *PATRICIA FUSCILE*  
CITY-ST-ZIP *3328 SW 46 AVE*

TITLE VD ☒ Delete  
NAME HAWKES, ROGER T.  
STREET ADDRESS 3326 S.W. 46 AVE.  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE *FORT LAUDERDALE, FL* ☐ Change ☐ Addition  
NAME *33314*  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☒ Delete  
NAME SESSA, RALPH C.  
STREET ADDRESS 3328 S.W. 46 AVE  
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*1/18/07*

*954-7924805*