## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State  1996  DIVISION OF CORPORATE							
DOCUM I. Corporation Na	ENT # <b>F95</b>	000006027	(5)				
JBJ TRUCKING, INC.				] 			
rincipal Place of	Business	Mailing Address			i <b>Bi</b> lli <b>Is</b> ili <b>Is</b> ili <b>I</b>	]   <b>    </b>	II 1 <b>46</b> 1 1 <b>46</b> 1
1503 BRENTWO	OD AVE	1503 BRENTWOO					
ELLWOOD CITY	PA 16117	ELLWOOD CITY F	TA 1011/	3. Date Incorporated or Qua	alified 3a. D	ate of Last Rep	iort
				12/11/1995			
Principal Place	e of Business	2a. Mailing Addres	is	4. FEI Number		<b>↓</b>	oplied For
. Principal Flace	5 g. <u>1100</u>	26		25-1567765		\$8.75	ot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, 6	etc.	5. Certificate of Status Desi	red 🔲		Additional equired
]		City & State		6. Election Campaign Finan	icing		May Be
City & State		28		Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country	8. This corporation has liab	ility for intangible ☐ Yes <b>K</b> No	e tax under s 1	99.032,
]	25	29	30	Florida Statutes  10. Name and Address of			
	9. Name and Address of	of Current Registered Agent	81 Name				
			ļ - I	t Address (P.O. Box Number is Not Ad	cceptable)		
CALZERT,			82 Stree	REMODES (1.0. EIOX NOTHOR IS NOT A			
1410 BIRD			83				
MIAMI FL	33140		84 City			<b>85</b> Zip	Code
					F	L	-intered office
Pursuant to or registere familiar with	o the provisions of Sections ad agent, or both, in the Sta n, and accept the obligation	607,0502 and 607,1508, Florida tte of Florida. Such change was a is of, Section 607,0505, Florida S	Statutes, the above named authorized by the corporation statutes.	corporation submits this statement for 's board of directors. I hereby accept	the appointmen	t as registered	agent. I am
SIGNATURE	Signature, typed or printed name of reg	gistered agent and little if applicable	(NOTE Registered Agent signatur		DAT	F	
SIGNATURE S	Signature, typed or printed name of res OFFI	gistered agent and little if applicable CERS AND DIRECTORS  DELE	(NOTE Registered Agent signatur  13. TE 1.1 TiTLE	or non-right when princialists	DAT	AND DIRECTO	RS IN 12
SIGNATURE S  12.  TILE NAME	Signature, typed or priciled name of recognitive.  OFF!  P PLETZ-BENEDICT, JO	gistered agont and title if applicable CERS AND DIRECTORS DELE DSEPH	(NOTE Registered Agent signatur  13.  TE 1.1 TiTLE  1.2 NAME	re required when renetating a  ADDITIONS/CHANGES	DAT	AND DIRECTO	RS IN 12
SIGNATURE  S  12.  IILE  LAME  STREET ADDRESS	Signature, typed or printed name of res OFFI P PLETZ-BENEDICT, JO RD #3BOX 8409 PIN	gistered agent and title if applicable  CERS AND DIRECTORS  DELE  DISEPH  E HILLS ESTATES	(NOTE Registered Agent signatur  13. TE 1.1 TiTLE	re required when renetating a  ADDITIONS/CHANGES	DAT	E AND DIRECTO Change	RS IN 12
SIGNATURE S  12.  THE  NAME  STREET ADDRESS  CHY-SI-ZIP	P PLETZ-BENEDICT, JO RD #380X 8409 PIN ELLWOOD CITY PA 1	gistered agent and title if applicable  CERS AND DIRECTORS  DELE  DISEPH  E HILLS ESTATES	(NOTE Registered Agric signatur  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRES  1.4 CITY - ST-ZIP	re required when renetating a  ADDITIONS/CHANGES	DAT	AND DIRECTO	RS IN 12
SIGNATURE S  12.  THE LAME STREET ADDRESS CHY-SI-ZIP  THE	P PLETZ-BENEDICT, JO RD #3BOX 8409 PIN ELLWOOD CITY PA 1	gistered agent and title if applicable CERS AND DIRECTORS DELE DISEPH E HILLS ESTATES 16117	(NOTE Registered Agric signatur  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRES  1.4 CITY - ST-ZIP	re required when renetating a  ADDITIONS/CHANGES	DAT	E AND DIRECTO Change	RS IN 12
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SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR