May 01, 1999 8:00 am Secretary of State

05-01-1999 90092 047 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G45488

1. Corporation Name

STABILE TRUCKING & LAND DEVELOPMENT, INC.					E/EXI GIONI BIAN) PYEKI BIANT 1884
<u> </u>	•				
Principal Plac	ce of Business	Mailing Address		1 18815 4011 81001 8111 W1881 (\$101 161)	EINIT STATT STATE STATE STATE (COL
2500 HOLLYWOOD BLVD STE. 212 2500 HOLLYWOOD BLVD			STE. 212		
HOLLYWOOD I	FL 33020	HOLLYWOOD FL 33020		DO NOT WOLTE IN THE	ABAOT.
}				DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
	· · ·			06/10/1983	
⊢ ¬ '	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2322177	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Sta	to.	City & State			
23 City & Sta	ie .	28 28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24	. 25		30	Personal Property Tax.	Mayes □ No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
MAN	NELLA, ROSS		81 Name		
2500 HOLLYWOOD BLVD., STE. 212			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33020					
, ,,,,			83		}
]	•		84 City		85 Zip Code
\				FL	
11. Pursuant office or a agent. I a	to the provisions of Sections 607.056 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was au ations of, Section 607.0505, Flori	s, the above-named cor thorized by the corporat da Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appo	intment as registered
SIGNATURE	·	·			<u>. </u>
12.	Signature, typed or printed name of registered age	ND DIRECTORS. (NOTE:	Registered Agent signature requirements 13.	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	UD DIDECTORS IN 12
TITLE	PST	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	STABILE, JAMES		1.2 NAME		
STREET ADDRESS	4004 NEATHANITIO DV		1.3 STREET ADDRESS		
	FT LAUDERDALE FL 33304		l l		
CITY-ST-ZIP TITLE	11 5 10 5 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	☐ DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME	1	<u> </u>	2.2 NAME	<u>-</u>	
STREET ADDRESS			2.3 STREET ADDRESS		
)			2.4 CITY-ST-ZIP		•
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	•	G
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4, CITY-ST-ZIP		
TITLE	 	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
7			E		
STREET ANDRESS			43 STREET ADDRESS	•	: 1
STREET ADDRESS			4.3 STREET ADDRESS	•	;

14. 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 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 or trustee 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

7 95-335 Date Daytime Phone #

☐ Change

Addition

R2E034 (11/98)