

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000082619

**Entity Name:** J DELEON TRUCKING, LLC

**FILED**  
**Jun 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1803 TORRINGTON DRIVE  
MASCOTTE, FL 34753

**New Principal Place of Business:**

**Current Mailing Address:**

1803 TORRINGTON DRIVE  
MASCOTTE, FL 34753

**New Mailing Address:**

**FEI Number:** 27-0622153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DELEON, RHONDA L  
1803 TORRINGTON DRIVE  
MASCOTTE, FL 34753 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DELEON, JUAN M  
Address: 1803 TORRINGTON DRIVE  
City-St-Zip: MASCOTTE, FL 34753

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUAN DELEON

MGR

06/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date