

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

FILED
Apr 07 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # M50127 (3)
1. Corporation Name
(JEFFREY TRUCKING CORP.)



DO NOT WRITE IN THIS SPACE

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|---|---|
| Principal Place of Business % PEDRO A. SANCHEZ 12356 S.W. 195 TERR. MIAMI FL 33177 | Mailing Address % PEDRO A. SANCHEZ 12356 S.W. 195 TERR. MIAMI FL 33177 |
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| 3. Date Incorporated or Qualified 04/10/1987 | Applied For Not Applicable |
| 4. FEI Number 65-0030237 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

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| 2. Principal Place of Business 21 12825 SW 189 ST. Suite, Apt. #, etc. 22 City & State 23 Miami FL Zip 24 33177 Country 25 USA | 2a. Mailing Address 26 12825 SW 189 ST. Suite, Apt. #, etc. 27 City & State 28 Miami FL Zip 29 33177 Country 30 USA |
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| 9. Name and Address of Current Registered Agent SANCHEZ, PEDRO A. 12356 S.W. 195 TERR. MIAMI FL 33177 12825 SW 189 ST Miami FL 33177 | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code |
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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|--|--|--|--|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPS SANCHEZ, PEDRO A. 12356 S.W. 195 TERR. MIAMI FL | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | DPS 12825 SW 189 ST Miami FL 33177 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T SANCHEZ, PEDRO A. 12356 S.W. 195 TERR. MIAMI FL | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | |

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.

SIGNATURE: x Pedro Sanchez Pedro A. Sanchez 4-4-98 (305) 378-0943

CR2E034 (10/97)