

SENT BY: ;

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APR-27-04 4:35PM;

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**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000058874 1. Entry Name GRADE AND HAUL, INC.	
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Principal Place of Business
12041 WEEWAHOOTIE RD.
ORLANDO, FL 32832Mailing Address
12041 WEEWAHOOTIE RD.
ORLANDO, FL 32832

04142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3725426	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered AgentBARNETT, STEPHEN D
422 W. FAIRBANKS AVE., #204
WINTER PARK, FL 32790**DO NOT WRITE
IN THIS SPACE**

6. 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. (SENDER, Registered Agent signature required when renewing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to FeesU000000144092
04/30/04-80117-020 150.00**10. OFFICERS AND DIRECTORS**

TITLE	PSTD
NAME	SMITH, STEVEN A
STREET ADDRESS	12041 WEEWAHOOTIE RD
CITY-ST-ZIP	ORLANDO, FL 32832

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Operator Phone #

Pres.

4-27-04 407-466-0192