

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136830

Entity Name: JO-ASH TRUCKING COMPANY, INC

FILED  
May 05, 2009  
Secretary of State

## Current Principal Place of Business:

745 NE 155TH STREET  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

745 NE 155TH STREET  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

FEI Number: 42-1680350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PIERRE, ALEXANDRA  
745 NE 155TH STREET  
NORTH MIAMI BEACH, FL FL 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PIERRE, JEAN  
Address: 745 NE 155TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VP ( ) Delete  
Name: PIERRE, ALEXANDRA  
Address: 745 NE 155TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: SEC ( ) Delete  
Name: PIERRE, ALEXANDRA  
Address: 745 NE 155TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: TREA ( ) Delete  
Name: ST PIERRE, CARINE  
Address: 745 NE 155TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXANDRA PIERRE

P

05/05/2009

Electronic Signature of Signing Officer or Director

Date