



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000028510	
1. Entity Name J & B TRANSPORT, INC.	

Principal Place of Business 19440 NW 4 AVENUE MIAMI, FL 33169	Mailing Address P.O. BOX 693865 MIAMI, FL 23369
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DO NOT WRITE IN THIS SPACE



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number 26-0136804	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BLAKELY, JULIUS
19440 NW 4 AVENUE
MIAMI, FL 33169**

DO NOT WRITE IN THIS SPACE

8. 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 _____ (NOTE: Registered Agent signature required when renewing)

Signature, typed or printed name of registered agent and title if applicable. DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000889662 04/22/08-R0063-011 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES BLAKELY, JULIUS 19440 NW 4 AVENUE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BLAKELY, MARTHA 19440 NW 4 AVENUE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRES BLAKELY-SMITH, BELINDA C/O 19440 NW 4 AVENUE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC BLAKELY, JEFFERY C/O 19440 NW 4 AVENUE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 exemptions contained 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 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 empowered.

SIGNATURE  **4/9/08 3057983417**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #