May 06, 1999 8:00 am Secretary of State

05-06-1999 90062 001 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400054272

HALL & HAUL TRUCKING, INC.

Principal Place of Business Mailing Address					c indernang ven guter maner Marter aufter unter meine mitter mit be iffatt indig indit indit indit indit			
6115 VERNA BETHANY RD 6115 VERNA BETHANY RD								
MYAKKA CITY	' FL 34251	MYAKKA CITY FL 34251						
US					DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed			
					07/12/1994			
Principal Place of Business 2a. Mailing Address				4. FEI Number		Ar	oplied For	
21 26					65-0511191	N	ot Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75	Additional	
27					J. Certificate of Status Desired	Fee Re	equired	
City & State City & State				6. Election Campaign Financing \$5.00		May Be		
23		28			Trust Fund Contribution	Added	to Fees	
Zíp	Country	Zip	Country	•	8. This corporation owes the current year In	ıtangible	-	
24	25		30		Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
DEN	INICE MALL		}81	Name				
DENNIS E. HALL 6115 VERNA BETHANY RD.			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
				- Olicet Address (1.0. box Number is Not Acceptable)				
MYAKKA CITY-FL 34251				83				
			84	City	- 	1001 700	O1-	
			04	City	FL	_ 85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the above	named cor	poration submits this statement for the purpose of	changing its	registered	
agent. I a	am familiar with, and accept the obligati	ons of Section 607.0505, Flori	itnorized by ida Statutes	tne corporat	ion's board of directors. I hereby accept the appo	intment as re	gistered	
SIGNATURE								
0.01.1101.2	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Ager	t signature requir	red when rejustating) DATE			
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE) D	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	HALL, DENNIS		1.2 NAME	(
STREET ADDRESS	6115 VERNA BETHANY RD.		1.3 STREET	ADDRESS				
CITY-ST-ZIP	MYAKKA CITY FL		1.4 CITY-ST	- ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE			Change	Addition	
NAME	HALL, PEGGY		2.2 NAME	-		•	_	
STREET ADDRESS	6115 VERNA BETHANY RD.		2.3 STREET	ADDRESS				
CITY-ST-ZIP	MYAKKA CITY FL		2. 4 CITY-S					
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME	1				
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			1					
TITLE		☐ DELETE	3.4. CITY-S' 4.1 TITLE	1- ZIP		Change	Addition	
NAME		El pereir	4.1 IIILE 4.2 NAME			CT Augusta	L AUGIGOII	
				1000000			ļ	
STREET ADDRESS			4.3 STREET				Ì	
CITY-ST-ZIP			4.4 CITY-ST	- ZIP			ſ	

14. I hereby certify that the information supplied with this filling 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 chapter or on an attachment with an address with all other like empowered. with all other like empowere

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

☐ DELETE

☐ DELETE

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Change

☐ Change

☐ Addition

Addition