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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400065706 (1) J. SCHALMO TRUCKING, INC. Principal Place of Business Mailing Address 7817 RUTILLIO COURT 8931 PANDORA LANE **NEW PORT RICHEY FL 34653** PORT RICHEY FL 34668 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 08/31/1994 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 59-3238355 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHALMO, JEFFREY A 8931 PANDORA LANE 82 Street Address (P.O. Box Number is Not Acceptable) PORT RICHEY FL 34668 83 84 City Zip Code 85 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** Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PVST DELETE Chance TITLE 1.1 TITLE NAME SCHALMO, JEFFREY A 1.2 NAME 8931 PANDORA LANE STREET ADDRESS 1.3 STREET ADDRESS PORT RICHEY FL 34668 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE CMD 2.1 TITLE Change Addition SCHALMO, JEFFREY A NAME 2.2 NAME STREET ADDRESS **89**31 PANDORA LANE 2.3 STREET ADDRESS PORT RICHEY FL 34668 CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHTY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ DELETE TITLE 61 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

4. Thereby 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:

Allow a dehalma

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Q13-842-6670

FILED

May 04 1998 8:00am

Secretary of State