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

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90044 046 ***150.00

DOOLINAENT #	D0 10000000000
DOCUMENT#	P94000076503

1. Corporation Name

C & J TRUCKING, INC.

Fillicipal Frace of busine
2008 DAHAMON ST
JACKSONVILLE FL 32211

US

Mailing Address

2008 DAHAMON ST

JACKSONVILLE FL 32211

US



DO NOT WRITE IN THIS SPACE

3. Date Ir corporated or Qualifed

10/17/1994

2. Principa P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			
21		26		59-3298333		Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			\$8.75 Additional Fee Recuired	
City & State	re	City & State			6. Election Campaig	n Financing	\$5.00	lav Be	
23		28			Trust Fund Contri	- 11	Added to		
Zip	Cour try	Zip Country		у	8. This corporation of	wes the current year in	itangible		
24	25	29	30		Personal Property	☐ Yes	□No		
	9. Name and Address of Current	Registered Agent			10. Name and Addre	ss of New Registered	Agent		
VAUGHN, CHARLES H 2008 DAHAMON ST JACKSONVILLE FL 32211			8		dross (P.O. Roy Number is	Not Accentable)			
			U	82 Street Acdress (P.O. Box Number is Not Acceptable)					
			8	3					
				4 City		Fl	85 Zip C	ode	
44 Duraur =	to the provisions of Sections 607.0502	and 607 1508 Florida Stati	tes, the abo	ve-named or	rooration submits this state	ment for the purpose of	f changing its i	egistered	
office ⊕r n	registered agent, or both, in the State of familiar with, and accept the obligations.	∉ Florida. Such change was ⊨	authorized b	y the corpora	tion's board of directors.	hereby accept the appo	intment as reg	stered	
SIGNATUF:E	Signature, typed or printed name of registered agent	and title if applicable (NOT	- Registered Ag	ent signature regu	ired when reinstating)	DATE			
12.	OFFICERS AN		13.			GES TO OFFICERS A	ND DIRECTOR	(S IN 12	
TITLE	D	☐ DELETE	1.1 TITLE				☐ Change	Addition	
NAME	VAUGHN, CHARLES H		1.2 NAME						
STREET ADDRESS	2008 DAHAMON ST		1.3 STRE	ET ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-						
TITLE		☐ DELETE	2.1 TITLE				Change	Addition	
NAME			2.2 NAME	:					
STREET ADDRESS			2.3 STRE	ET ADDRESS					
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP					
TITLE		DELETE	3.1 TITLE				☐ Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STRE	ET ADDRESS				ŀ	
CITY-ST-ZIP			3.4. CITY	-ST-ZIP					
TITLE		☐ DELETE	4 1 TITLE				☐ Change	☐ Addition	
NAME			4 2 NAM	E					
STREET ADDRESS			43 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition	
NAME			5.2 NAME	<u> </u>					
STREET ADDRLSS			5.3 STRE	ET ADDRESS				{	
CITY-ST-ZIP			5.4 CITY	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE	T			Change	☐ Addition	
NAME			6.2 NAM	1					
STREET ADDRESS			6.3 STRE	ET ADDRESS				Į	
CITY-ST-ZIP			64 CITY		Castion (10.0°(2)(i) Class				

4. I herely certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0."(3)(i), Florida Statutes. I further certify that the informatio 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 although the mention and directors with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE R ON DIRECTOR

1122-99

sytme Phone #

:R2E034 (11/98)