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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P95000007792 (1)

J & J TRUCKING & GRADING, INC.

**FILED** Apr 23 1998 8:00am Secretary of State

| Principal Place of Business  22076 PALM WAY #201  BOCA RATON FL 33433 |   | Mailing Address  |                                |                    |                   | !!! <b>!!</b> !!! <b>!!</b>  | 111 18 811 12 610 101 | )16 1191 (691                     |                            |         |
|---|---|--|--------------------------------|--------------------|-------------------|--|-----------------------|-----------------------------------|----------------------------|---------|
|   |   | 22076 PALM WAY   | 22076 PALM WAY                 |                    |                   |  |                       |                                   |                            |         |
|   |   | #201<br>BOCA RATON FL 33433  |                                |                    |                   | DO NOT WRITE IN THIS SPACE   |                       |                                   |                            |         |
| LOOK MATOR  | 110 00430   | DOON INTOIT TE SOTO  |                                |                    |                   | 3. Date Incorporated or Qualified  |                       |                                   |                            |         |
|   |   |  |                                |                    |                   | 01/30/1995   |                       |                                   |                            |         |
| 2, Principal P  | lace of Business  | 2a. Mailing Address  |                                |                    |                   | 4. FEI Number  |                       | · · · · · · · · · · · · · · · · · | pplied For                 | _       |
| 21  |   | 26   |                                |                    |                   | 65-0568307   |                       | <del></del>                       | ot Applicab                | ole     |
| Suite, Apt. #, etc.   |   | Suite, Apt #, etc.   |                                |                    |                   | 5. Certificate of Status Desired   |                       |                                   | Additional equired         |         |
| City & Stat   | e   | City & State   |                                |                    |                   | 6. Election Campaign Financing   |                       |                                   | May Be                     |         |
| 23  |   | 28   |                                |                    |                   | Trust Fund Contribution  |                       |                                   | to Fees                    |         |
| Zip Country   |   | Zip  | Zip Country                    |                    |                   | 8. This corporation owes or has p  |                       |                                   |                            |         |
| 24  | 25  | 29   | 30                             |                    |                   | Personal Property Tax due Juni   |                       |                                   | No                         |         |
|   | 9. Name and Address of Curre  | ent Registered Agent   |                                |                    |                   | 10. Name and Address of New Ro   | gistered              | i Agent                           |                            |         |
|   | Y, KEITH A  |  | 81                             | '   '              | Name              |  |                       |                                   |                            |         |
| 1   | 076 PALM WAY  |  | 82                             | ! !                | Street Addre      | ess (P.O. Box Number is Not Accepta  | ble)                  |                                   |                            |         |
| #2  |   |  | 83                             | ╁                  | <del></del>       |  |                       |                                   |                            |         |
| BO  | ICA RATON FL 33433  |  |                                | $\perp$            |                   |  |                       |                                   |                            |         |
|   |   |  | 84                             | (                  | City              |  | FI                    | L   85   Zip                      | Code                       |         |
| <ul> <li>Office or r</li> </ul>                                       | to the provisions of Sections 607.05 registered agent or both, in the Starm familiar with, and accopt the obli- | ite of Florida. Such change was<br>igations of, Section 607.0505, Fl | authorized b<br>lorida Statute | y th               | he corporati      | oration submits this statement for the ion's board of directors. I hereby acce | purpose<br>pt the ap  | of changing in a pointment as     | ts registere<br>registered | ∌d<br>i |
| 12.   |   | ND DIRECTORS   | 13.                            | Jenik t            | arginalo o recome | ADDITIONS/CHANGES TO OFFI  |                       | ND DIRECTOR                       | RS IN 12                   | -       |
| TITLE   | PT  | ☐ DELETE.  | 1.1711段                        | 1.1 TITE           |                   |  |                       | ☐ Change                          | Additi                     | on      |
| NAME  | KEITH ALLEN ELY   |  | 1.2 NAME                       |                    |                   |  |                       |                                   |                            |         |
| STREET ADDRESS  | 22076 PALMS WAY #201  |  | 1.3 STREE                      | T AD               | DRESS             |  |                       |                                   |                            |         |
| CITY - ST - ZIF   | BOCA RATON FL 33433   | ——————————————————————————————————————                               | 1.4 CITY -                     | ST-Z               | ZIP               |  |                       |                                   | 1 4366                     |         |
| TITLE   | PT V  | ☐ DELETE   | 2.1 THTLE                      |                    |                   |  |                       | L Change                          | Additi                     | -OH     |
| NAME<br>exercis approprie   | JUDITH DIANE CALIN-ELY<br>22076 PALMS WAY #201  |  | 2.2 NAME                       | 2.3 STREET ADDRESS |                   |  |                       |                                   |                            |         |
| STREET ADDRESS CITY-ST-ZIP  | BOCA RATON FL 33433   |  | 2.3 STACE                      |                    |                   |  |                       |                                   |                            |         |
| TITLE   | DOOR WHON TE SOIDS  | DELETE   | 3.1 TITLE                      | 31                 |                   |  |                       | Change                            | Additi                     | ion     |
| NAME  |   |  | 3.2 NAME                       |                    |                   |  |                       |                                   |                            |         |
| STREET ADDRESS  |   |  | 3.3 STREE                      | T AD               | DRESS             |  |                       |                                   |                            |         |
| CITY-ST-ZIP   |   |  | 3.4. CITY-                     | ST-                | ZIP               |  |                       |                                   |                            |         |
| TITLE   |   | [] DELETE  | 4.1 TITLE                      |                    |                   |  |                       | L Change                          | Additi                     | ion     |
| NAME  |   |  | 4. 2 NAME                      |                    |                   |  |                       |                                   |                            |         |
| STREET ADDRESS  |   |  | 4.3 STREE                      |                    | - 1               |  |                       |                                   |                            |         |
| CITY-ST-ZIP   |   | DELETE   | 4.4 CITY -                     | S1-7               | ZIP               |  |                       | ☐ Change                          | Additi                     | ion     |
| TITLE   |   | L DELETE   | 5.1 TITLE<br>5.2 NAME          |                    |                   |  |                       | ☐ creating                        | - Voniti                   | ·MI     |
| NAME<br>STOCEL ADDRESS  |   |  | 5.2 NAME<br>5.3 STREE          |                    | nneree            |  |                       |                                   |                            |         |
| STREET ADDRESS  | 1   |  | 5.4 City-                      |                    |                   |  |                       |                                   |                            |         |
| CITY-ST ZIP   | · · · · · · · · · · · · · · · · · · ·   | DELETE   | 5.4 CITY-                      | 31-1               | Ţ11               |  |                       | Change                            | Additi                     | ion     |
| NAME  |   | hand occupa  | 6.2 NAME                       |                    |                   |  |                       |                                   |                            |         |
| STREET ADDRESS  |   |  | 63 STREE                       |                    | ODRESS            |  |                       |                                   |                            |         |
| CITY-ST. 7IP  |   |  | 64 CITY-                       |                    |                   |  |                       |                                   |                            |         |

14. 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 altachment with an address