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Feb 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000045267 (8)

1. Corporation Name  
CRUZ BROS. TRUCKING, INC.



Principal Place of Business  
158 MT. PLEASANT RD  
GROVELAND FL 34736

Mailing Address  
158 MT. PLEASANT RD  
GROVELAND FL 34736-2132

3. Date Incorporated or Qualified 06/06/1995	3a. Date of Last Report 04/22/1996
4. FEI Number 59-3317817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent  
CRUZ, MANUEL  
158 MT. PLEASANT RD  
GROVELAND FL 34736

10. Name and Address of New Registered Agent  
81 Name Edith Duncan  
82 Street Address (P.O. Box Number is Not Acceptable)  
789 W Hwy 50  
83  
84 City Clermont FL 85 Zip Code 34711

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 Edith Duncan Edith Duncan (Bookkeeper) 1-17-97  
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	CRUZ, MANUEL	
STREET ADDRESS	158 MT. PLEASANT RD	
CITY - ST - ZIP	GROVELAND FL 34736	
TITLE	D	DELETE
NAME	CRUZ, RAFAEL	
STREET ADDRESS	140 MT. PLEASANT RD	
CITY - ST - ZIP	GROVELAND FL 34736	
TITLE	D	DELETE
NAME	CRUZ, MIGUEL	
STREET ADDRESS	752 ANDERSON AVE	
CITY - ST - ZIP	MASCOTTE FL 34753	
TITLE	D	DELETE
NAME	CRUZ, RAMIRO	
STREET ADDRESS	762 ANDERSON AVE	
CITY - ST - ZIP	MASCOTTE FL 34753	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby 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: [Signature] 1-24-97  
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)