

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90005 029 ***158.75

40008564



01122007 Chg-P CR2E034 (12/06)

DOCUMENT # P95000075416 1. Entity Name N & J TRUCKING, INC.																																																																																																																															
Principal Place of Business 3220 N.W. SOUTH RIVER DRIVE MIAMI, FL 33142			Mailing Address 3220 N.W. SOUTH RIVER DRIVE MIAMI, FL 33142																																																																																																																												
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		4. FEI Number 65-0618607 Applied For <input type="checkbox"/> Not Applicable																																																																																																																											
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent MONOCANDILOS, JORDAN 3201 NW 24TH ST RD MIAMI, FL 33142																																																																																																																											
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MONOCANDILOS, JORDAN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24TH ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33142</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VP</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CHABO, JORGE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24TH ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33142</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SUAREZ, ROSANA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24TH ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>DVP</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MONOCANDILOS, NICOLAS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24TH ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>DVP</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MONOCANDILOS, DORA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24TH ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	NAME	<input type="checkbox"/> Delete	NAME	MONOCANDILOS, JORDAN		STREET ADDRESS	3201 NW 24TH ST RD		CITY-ST-ZIP	MIAMI, FL 33142		TITLE	VP	<input type="checkbox"/> Delete	NAME	CHABO, JORGE		STREET ADDRESS	3201 NW 24TH ST RD		CITY-ST-ZIP	MIAMI, FL 33142		TITLE	S	<input type="checkbox"/> Delete	NAME	SUAREZ, ROSANA		STREET ADDRESS	3201 NW 24TH ST RD		CITY-ST-ZIP	MIAMI, FL		TITLE	DVP	<input type="checkbox"/> Delete	NAME	MONOCANDILOS, NICOLAS		STREET ADDRESS	3201 NW 24TH ST RD		CITY-ST-ZIP	MIAMI, FL		TITLE	DVP	<input type="checkbox"/> Delete	NAME	MONOCANDILOS, DORA		STREET ADDRESS	3201 NW 24TH ST RD		CITY-ST-ZIP	MIAMI, FL		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VICE PRESIDENT</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>E VANGELIA (LINA) MONOCANDILOS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3201 NW 24 ST RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33142</td> <td></td> </tr> </table>		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	E VANGELIA (LINA) MONOCANDILOS		STREET ADDRESS	3201 NW 24 ST RD		CITY-ST-ZIP	MIAMI, FL 33142	
TITLE	NAME	<input type="checkbox"/> Delete																																																																																																																													
NAME	MONOCANDILOS, JORDAN																																																																																																																														
STREET ADDRESS	3201 NW 24TH ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL 33142																																																																																																																														
TITLE	VP	<input type="checkbox"/> Delete																																																																																																																													
NAME	CHABO, JORGE																																																																																																																														
STREET ADDRESS	3201 NW 24TH ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL 33142																																																																																																																														
TITLE	S	<input type="checkbox"/> Delete																																																																																																																													
NAME	SUAREZ, ROSANA																																																																																																																														
STREET ADDRESS	3201 NW 24TH ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL																																																																																																																														
TITLE	DVP	<input type="checkbox"/> Delete																																																																																																																													
NAME	MONOCANDILOS, NICOLAS																																																																																																																														
STREET ADDRESS	3201 NW 24TH ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL																																																																																																																														
TITLE	DVP	<input type="checkbox"/> Delete																																																																																																																													
NAME	MONOCANDILOS, DORA																																																																																																																														
STREET ADDRESS	3201 NW 24TH ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL																																																																																																																														
TITLE		<input type="checkbox"/> Delete																																																																																																																													
NAME																																																																																																																															
STREET ADDRESS																																																																																																																															
CITY-ST-ZIP																																																																																																																															
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																													
NAME																																																																																																																															
STREET ADDRESS																																																																																																																															
CITY-ST-ZIP																																																																																																																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																													
NAME																																																																																																																															
STREET ADDRESS																																																																																																																															
CITY-ST-ZIP																																																																																																																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																													
NAME																																																																																																																															
STREET ADDRESS																																																																																																																															
CITY-ST-ZIP																																																																																																																															
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition																																																																																																																													
NAME	E VANGELIA (LINA) MONOCANDILOS																																																																																																																														
STREET ADDRESS	3201 NW 24 ST RD																																																																																																																														
CITY-ST-ZIP	MIAMI, FL 33142																																																																																																																														
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																															
SIGNATURE: JORDAN MONOCANDILOS 01/11/07 305-633-7711 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																															