

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

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| DOCUMENT # P9600007312 | |
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| J.L.PTRUCKING, INC. | L TO KUNDAR HITE SOLVE BANK BANK BANK BANK BANK BANK BANK BANK |

| Principal Place of Business (C)O LLP, TRIJCKING NC. Sky W, DATTON CR. FT. LAUDERDALE FL 33312 Z.P. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualifed 01/19/1996 3. Date Incorporated or Qualifed 01/19/1996 3. Date Incorporated or Qualifed 01/19/1996 4. FEI Number 65.0628786 5. Certificate of Status Desired 5. Scottinate of Status Desired 5. Scottinate of Status Desired 5. Certificate of Status Desired 6. Election Carpages Inflamenting 6. Election Carpages Inflamenting 6. Election Carpages Inflamenting 6. Election Carpages Inflamenting 6. E |
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| 22 Paul Paul Paul Paul Paul Paul Paul Paul |
| Trust Fund Contribution Added to Fees |
| Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LASSIN, JEAN P. 542 W. DAYTON CIR 52 Street Address (P.O. Box Number is Not Acceptable) 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 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 and site if applicable. SIGNATURE D |
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14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone i

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