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

PROFIT CORPORATION ANNUAL REPORT

CHY-SI-ZIP

SIGNATURE: \



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

P96000049095 (8) **DOCUMENT #** AL-JUMA TRUCKING ENTERPRISES, INC.

Principal Place of Business Mailing Address 878 SHETTER AVENUE. #6 678 SHETTER AVENUE. #6 JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250-5336 3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-3394131 Not Applicable Suite, Apt.#, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes \quad No Country 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **ELKINS, HAROLD** 6061 MERRILL ROAD Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32277 83 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgr at milityped or professional of regelered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 96/6 Addition DELETE Change THLE 1.1 TITLE TADROS, ALFRED NAME 1.2 NAME 678 SHETTER AVENUE. #6 13 STREET ADDRESS STREET ADDRESS. JACKSONVILLE BEACH FL 32250 1.4 CITY-ST-ZIP CHY-ST ZIE ☐ Addition DELETE 2.1 TITLE Change 100 WOLF, JULIAN 22 NAME MAME 678 SHETTER AVENUE, #6 2.3 STREET ADDRESS STEEL LADORESS JACKSONVILLE BEACH FL 32250 2. 4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE THE 3.2 NAME NAMA 3.3 SYREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY-St ZP Change Addition DELETE 4.1 TITLE THEF NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TIFLE 5.2 NAME NAMI 5.3 STREET ADDRESS STREET ADDRESS CITY S1-20 54 CITY-ST-ZIP DELETE Change Addition Hit 6.1 TITLE NAM 6.3 STREET ADDRESS STREET ADDRESS

64 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 you are attachment with an address.

FILED May 07 1997 8:00am Secretary of State



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