
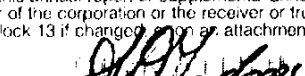


FILED

May 07 1997 8:00am  
Secretary of State

<p align="center"><b>PROFIT CORPORATION</b>  <b>ANNUAL REPORT</b>  <b>1997</b></p>		<p align="center">FLORIDA DEPARTMENT OF STATE  <b>Sandra B. Mortham</b>          Secretary of State          DIVISION OF CORPORATIONS</p>
<p><b>DOCUMENT # P96000049095 (8)</b></p>		
<p>1. Corporation Name  <b>AL-JUMA TRUCKING ENTERPRISES, INC.</b></p>		
<p>Principal Place of Business  <b>678 SHETTER AVENUE. #6</b>  <b>JACKSONVILLE BEACH FL 32250</b></p>		<p>Mailing Address  <b>678 SHETTER AVENUE. #6</b>  <b>JACKSONVILLE BEACH FL 32250-5336</b></p>
<p>2. Principal Place of Business</p> <p>21 Suite, Apt. #, etc.</p> <p>22 City &amp; State</p> <p>23 Zip Country</p> <p>24 Country</p>		<p>2a. Mailing Address</p> <p>26 Suite, Apt. #, etc.</p> <p>27 City &amp; State</p> <p>28 Zip Country</p> <p>29 Country</p>
<p>9. Name and Address of Current Registered Agent</p> <p><b>ELKINS, HAROLD</b>  <b>6061 MERRILL ROAD</b>  <b>JACKSONVILLE FL 32277</b></p>		
		<p>81 Name</p> <p>82 Street Address</p> <p>83</p> <p>84 City</p>
<p>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</p>		
<p>SIGNATURE _____</p> <p align="center"><small>Signature typed or printed name of registered agent and title if applicable</small></p>		
<p align="right"><small>(NOTE: Registered Agent signature required)</small></p>		
<p align="center"><b>12. OFFICERS AND DIRECTORS</b></p>		
<p>TITLE <b>D</b> <input type="checkbox"/> DELETE</p> <p>NAME <b>TADROS, ALFRED</b></p> <p>STREET ADDRESS <b>678 SHETTER AVENUE, #6</b></p> <p>CITY-ST-ZIP <b>JACKSONVILLE BEACH FL 32250</b></p>	<p><b>13.</b></p> <p>1.1 TITLE</p> <p>1.2 NAME</p> <p>1.3 STREET ADDRESS</p> <p>1.4 CITY-ST-ZIP</p>	
<p>TITLE <b>D</b> <input type="checkbox"/> DELETE</p> <p>NAME <b>WOLF, JULIAN</b></p> <p>STREET ADDRESS <b>678 SHETTER AVENUE, #6</b></p> <p>CITY-ST-ZIP <b>JACKSONVILLE BEACH FL 32250</b></p>	<p>2.1 TITLE</p> <p>2.2 NAME</p> <p>2.3 STREET ADDRESS</p> <p>2.4 CITY-ST-ZIP</p>	
<p>TITLE <input type="checkbox"/> DELETE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>	<p>3.1 TITLE</p> <p>3.2 NAME</p> <p>3.3 STREET ADDRESS</p> <p>3.4 CITY-ST-ZIP</p>	
<p>TITLE <input type="checkbox"/> DELETE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>	<p>4.1 TITLE</p> <p>4.2 NAME</p> <p>4.3 STREET ADDRESS</p> <p>4.4 CITY-ST-ZIP</p>	
<p>TITLE <input type="checkbox"/> DELETE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>	<p>5.1 TITLE</p> <p>5.2 NAME</p> <p>5.3 STREET ADDRESS</p> <p>5.4 CITY-ST-ZIP</p>	
<p>TITLE <input type="checkbox"/> DELETE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY-ST-ZIP</p>	<p>6.1 TITLE</p> <p>6.2 NAME</p> <p>6.3 STREET ADDRESS</p> <p>6.4 CITY-ST-ZIP</p>	
<p>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, on an attachment with an address.</p>		
<p><b>SIGNATURE:</b>  <b>REQUIRED</b></p> <p align="center"><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></p>		



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