2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000050486

Entity Name: LEONZI JONES TRUCKING INC.

FILED Jan 04, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

20030 NE 21 AVE 8500 NW 22ND AVENUE

N MIAMI BEACH, FL 33179 MIAMI, FL 33147

Current Mailing Address: New Mailing Address:

20030 NE 21 AVE 8500 NW 22ND AVENUE

N MIAMI BEACH, FL 33179 MIAMI, FL 33147

FEI Number: 65-0683717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, LEONZI
20030 NE 21 AVE

JONES, LEONZI
8500 NW 22ND AVENUE

20030 NE 21 AVE 8500 NW 22ND AVENUE N MIAMI BEACH, FL 33179 US MIAMI, FL 33147 US

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.

SIGNATURE: LEONZI JONES 01/04/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 JONES, LEONZI
 Name:
 JONES, LEONZI

 Address:
 20030 NE 21 AVE
 Address:
 8500 NW 22ND AVENUE

 City-St-Zip:
 N MIAMI BEACH, FL 33179
 City-St-Zip:
 MIAMI, FL 33147

Title: S () Delete Title: S (X) Change () Addition

 Name:
 JONES, FLONNIE
 Name:
 JONES, FLONNIE

 Address:
 20030 NE 21 AVE
 Address:
 8500 NW 22ND AVENUE

 City-St-Zip:
 N MIAMI BEACH, FL 33179
 City-St-Zip:
 MIAMI, FL 33147

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONZI JONES PD 01/04/2008