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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1998

Principal Place of usiness



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084072 (3)

J & J TRUCKING OF PALM BEACH COUNTY, INC.

350 MARTIN LANE 350 MARTIN LANE WEST PALM BEACH FL 33413 WEST PALM BEACH FL 33413 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0698648 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 24 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROOME, WILLIAM R H 1818 AUSTRALIAN AVE SOUTH Street Address (P.O. Box Number is Not Acceptable) **SUITE 202, COMMERCE POINTE** 83 WEST PALM BEACH FL 33409 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1111111 ROSSO, JOSEPH A. I NAME 1.2 NAME 111 VASSAR DRIVE STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE PERKINS, JERRY NAME 2.2 NAME 5970 FERN COURT **STREET ADDRESS** 2.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE

44. CITY-S1-ZIP

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 is use 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 tructive 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 appears in address

3.2 NAME

41 THLE

4. 2 NAMI

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETI

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-S1-ZIP

4.4 CITY-ST-ZIP

3.4. CITY - \$1 - ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-\$T-ZIP

CITY-ST-ZIP

Joe Rosso I

DWG 5/8/98 561-688-0288

Change

Change

Change

Addition

Addition

Addition

FILED

May 19 1998 8:00am

Secretary of State