FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000036895

G & J TRUCKING CORPORATION



FILED

03 MAR 24 PH 12: 20

SECRETARY OF STATE

	DO NOT WEIT	E IN THIS	SDAC	E		ALLAHASSEE, FI	LORIDA	
DO NOT WRITE IN THIS 2. Principal Place of Business 4889 NW 5TH STREET Suite, Apt. #, etc. 3. Malling Address 4889 NW 5TH Suite, Apt. #, etc.			H STREET			DO NOT WHITE IN THIS SPACE		
City & Star MIAMI, F		City & State MIAMI, FL	· ·			4. FEI Number 65-0602792 Applied For Not Applicable		
Zip 33126	Country	33126	Count	ry	5. Certifi		8.75 Additional se Required	
-				0000000000		7. Name and Address of Current Registered Agent		
DO NOT WRITE						Box Number is Not Acceptable)		
IN THIS SPACE				4889 NW 5TH ST		STREET		
				City MIAMI		FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its re				City MIAMI FL Zio Code 33126 tered office or registered agent, or both, in the State of Florida. I am familiar with, and accept				
the obliga	tions of registered agent,							
RODRIGUEZ, JOSE A. 03/19/2003 Signature. typed or printed name of registered agent and table if applicable. (NOTE: Registered Agent signature required when rensisting) DATE							2003	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.		ND DIRECTORS					-	
NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ, JOSE A. 4889 NW 5TH ST. MIAMI, FL 33126		NAME STREE	TITLE NAME STREET ADDRESS CITY-ST- BP		1000169755 /24/0301083017	171 **300.00 g	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RODRIGUEZ, JAMES 4889 NW 5TH ST. MIAMI, FL 33126		NAME STREE	THEE MAME STREET ADDRESS CITY-ST-ZIP			HONE)	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			₩ (\$0,000,000)	Taddress St-zip		N H	7	

12. 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 report or supplemental 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 10 or on an attachment with an address.

SIGNATURE:

JOSE A. RODRIGUEZ

305 441-0276