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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000042923 (7)

9, Name and Address of Current Registered Agent

R. & P. TRUCKS COMPANY

JIMENEZ, RICARDO D 14825 SW 38TH TER

MIAMI FL 33185

Total Control of Books

CITY-ST-ZIP

Principal Place of Business Mailing Address					
14825 SW 36TH TER MIAMI FL 33185		14825 SW 36TH TER MIAMI FL 33185		DO NOT WRITE IN THIS SPACE	
_			3. Date Incorporated or Qualified 05/14/1997		
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 65-0758465	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζ(p	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	

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.

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City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELE16 Change Addition TITLE PD 1.1 TITLE NAME JIMENEZ, RICARDO D 1.2 NAME 14825 SW 36TH TER STREET ADDRESS 1.3 STREET ADDRESS **M**IAMI FL 33185 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE STD CAEIRO, SRAFIN 2.2 NAME 1040 SW 70 AVE, LOT A-145 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33144 CITY-ST-ZIP 2.4 CITY-S1-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change ☐ DELETE Addition 4.1 TITLE TITLE NAME 4, 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

14. Thereby 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 truetee 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 attachment with an address.

6.4 CITY - ST - ZIP

Paril + 1/200 98

R2E034 (10/97)

Zip Code

FILED

Apr 28 1998 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)