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 #

P97000078416 (9)

S & M TRUCKING & HAULING & EQUIPMENT, INC.

FILED

98 MAR -2 AM 11: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	e of Business	M	Mailing Address				
2600 HAMMONOVILLE RD #41 POMPANO BEACH FL 33069			2600 HAMMONDVILLE RD #41 POMPANO BEACH FL 33069				
							DO NOT WRITE IN THIS SPACE
1							3. Date Incorporated or Qualified
							09/08/1997
2. Principal P	lace of Business	2a.	Mailing Address				4. FEt Number Applied For
21			1				65-0777772 Not Applicable
Suite, Apt. #, etc.		26	Suite, Apl. #, etc.				\$8.75 Additional
22 SAME		27	SAME				5. Certificate of Status Desired Fee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees
Zip	Country	[Zφ	Coun	try		B. This corporation owes or has paid the current year Intangible
24	25	29		30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Regis	tered Agent				10. Name and Address of New Registered Agent
RICHARDELLI, DONALD M			81 Name		Name	SAME	
2600 HAMMONDVILLE RD #41 POMPANO BEACH FL 33069				6	2	Street A	Address (P.O. Box Number is Not Acceptable)
) E	33		
ļ				8	14	City	85 Zip Code
1]		Oity	FL s z coos
11. Pursuant	to the provisions of Sections 607.0	502 and 6	07.1508, Florida Stat	utes, the abo	ve	named (corporation submits this statement for the purpose of changing its registered
agent la	egistered agent, or both, in the Sta im familiar with, and accept the obl	ite of Florid ligations of	ดลา ธนตก change was f. Section 607.0505, I	s aumonzed Florida Statul	by tes	the corpo	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	•						
ORIGINAL	Signature, typed or printed name of registered in			Olf Registered A	Ager	nt signature r	required when reinstaling) DATE
12.	OF LICERS A	<u>'ND DIBL</u>		13.		 _	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	STEPHANIE ANN T	TCUA	DELETE	1.1 TITL	Ē	ŀ	OWNER & LPRES HIGHLINGEN Change Addition
NAME	2 SAN U NOW CHEET IN		A 4 44	1.2 NAM	E		STEPHANIE ANN TICHANSKY
STREET ADDRESS	POMPANO BEACH F		20060	1.3 STR	EET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH I	· Pr	33069	1.4 CITY	- \$1	í-Z i P	2600 HAMMONDVILLE RD # 41
TITLE	,		DELETE	2.1 TITL	E		POMPANO BEACH F.L. 33069 Change Addition
NAME				2.2 NAM	ΙE		
STREET ADDRESS				23 STR	ET /	ADDRESS	
CITY-ST-ZIP				2 4 CITY	1- 8	T-ZIP	
TITLE /	•		DELETE	3 1 TITL	E		☐ Change ☐ Addition
NAME				3.2 NAM	E		4000024462547
STREET ADDRESS				3.3 STRE	ET /	address	-n3/n2/98n1104n22
CITY-ST-ZIP				3.4 CITY	<u>۲۰5</u>	T-ZIP	4000024462547 -03/03/9801104022 ****158,75 ****158,75
TITLE			DELFTE	4.1 TITLE	E		Change Addition
NAME				4. 2 NAN	Æ.	ŀ	
STREET ADDRESS				4.3 STRE	ET /	ADDRESS	
CITY-ST-ZIP_				4.4 CITY	- ST	I-ZiP	
TITLE			☐ DEL€TE	5.1 TITLE	F		Change Addition
NAME				5.2 NAM	E	J	
STREET ADDRESS				53STRE	ET /	ADDRESS	
CITY-ST-ZIP				5.4 CITY	- ST	- ZIP	
TITLE			DELETE	611111			Change Addition
NAME				62 NAM	E		
STREET ADDRESS				6.3 STRE	ET /	ADDRESS	M)
CITY-ST-ZIP				6.4 CITY			(()
	certify that the information supplied	with this f	liling does not qualify				d in Section 119.07(3)(i), Florida Statutes. I further certily that the information

Indicated on this annual report or supplied with ansuming does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. Turther certify that the information indicated on this annual report or supplience all 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 trustee 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.