PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9700089369

DEAN WARD JR. TRUCKING, INC.

Principal Place of Business			Mailing Address									11110 1311 1981	
RT. 4 BOX 3700. HIGHWAY 121 RT. 4 BOX 3700. HIGHWAY 121													
LAKE BUTLER FL 32054 LAKE BUTLER FL 32054								DO NOT WRITE IN THIS SPACE					
								3. Date incorporated	or Qualifed				Ì
								10/16/1997					
2. Principal Pl	lace of Business		2a. Mailing	Address				4. FEI Number			_ 	olied For	1
21	•		26					59-3275371				Applicable	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status	Desired		\$8.75 A Fee Re			
City & State	0		City.&:S	State		-		=6.=Election:Campaign	Financing		\$5:00-	May Be	-
23			28					Trust Fund Contrib	ution		Added to	Fees	1
Zip	Cour	ntry	Zip		Coun	try		8. This corporation ov	ves the cur	rent year Inta			
24	25		29	3	30			Personal Property				□No	-
	9. Name and Add	ress of Current R	egistered Ag	jent				10. Name and Addres	s of New	Registered /	Agent		┨
			A 1110			B1	Name						
CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BOULEVARD #211						82	Street Addre	et Address (P.O. Box Number is Not Acceptable)					
PALM BEACH GARDENS FL 33418					1	В3							1
			•		ļ.	B4	City			FI	85 Zip C	ode	1
agent. I a	m familiar with, and a						signature required	when reinstating)		DATE		_	 -
12.	Signature, types or pretion in	OFFICERS AND			13.		<u> </u>	ADDITIONS/CHANG	SES TO OF	FICERS AN	D DIRECTO	RS IN 12] }
TITLE	D			☐ DELETE	1.1 TITL	.E					☐ Change	☐ Addition] ;
NAME	WARD, DEAN JR				1.2 NAW	ΛE							1;
STREET ADDRESS		HIGHWAY 121			1.3 STR	EET	ADDRESS						
CITY-ST-ZIP	LAKE BUTLER FL				1.4 CITS	Y-\$T-	- ZiP						1 3
TITLE				DELETE	2.1 TITL	Æ					Change	Addition	ļ
NAME					2.2 NAM	Æ							
STREET ADDRESS					2.3 STR	EET	ADDRESS						Ì
CITY-ST-ZIP					2.4 CIT	_	-ZIP			****	= m o ===	The state of	-
_TITLE				DELETE	= 4.3.1.TIIL	E					Change	Addition	
NAME					3.2 NAM								
STREET ADDRESS	1				3.3 STR	EET	ADDRESS						ļ
CITY-ST-ZIP					3.4. CIT	_	-ZIP				Change	☐ Addition	-
TITLE				☐ DELETE	4.1 TITL							L. Addison	}
NAME					4. 2 NA								İ
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP				□ DELETÉ	4.4 CITY 5.1 TITU		-ZIP				Change	☐ Addition	-
TITLE				00000	5.2 NAA		Ì	•					}
NAME	1						1						1

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 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 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

Change

Addition

FILED

Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90034 029 ***150.00