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

P97000093776 (7) DOCUMENT #

R & J TRUCKING CORPORATION

FILED Apr 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						THE LOGIC COURSE WINE	1891
		1355 NW 154 LN. PEMBROKE PINES FL 33			DO NOT WRITE IN THIS SPA	ACE	
					3. Date Incorporated or Qualified 10/31/1997		
2. Principal Pi	ace of Business	2a. Mailing Address	•		A FFI Minakas	Applied	For
21		26			65-0790648	Not App	licable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additio	
22		27			5. Certificate of clattes bearied	Fee Required	<u>d</u>
City & State	3	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May I Added to Fee	
Zip			Соиг	try	8. This corporation owes or has paid the current year Intangible		
24	25	29	30				
	9. Name and Address of Curren	t Registered Agent		nal numer	10. Name and Address-of New Registered Ag	ent	
	omez, rey a		[1	81 Name			
1355 NW 154 LN. PEMBROKE PINES FL 33028			Ī	32 Street Add	ddress (P.O. Box Number is Not Acceptable)		
,			ļ	B3			$\neg \neg$
				34 City	FL	85 Zip Code	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was a	authorized	by the corpora	poration submits this statement for the purpose of clation's board of directors. I hereby accept the appoin	nanging its registation	stered tered
SIGNATURE	att jannillar with, and accept the obliga	30003 01, 0000001 007.0000, 116	onou olule				
SIGNATORE	Signature, typed or printed name of registered age			Agent signature requ	ired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D		Addition !
TITLE	DP DEV 4	DELETE	1.1 T(T)		L	Change	AUGILION
NAME	GOMEZ, REY A 1355 NW 154 LN.		1.2 NA				li li
STREET ADDRESS	PEMBROKE PINES FL 33028			EET ADDRESS			ļ
CITY-ST-ZIP	DP	DELETE		Y-ST-ZiP		Change	Addition
TITLE	GOMEZ, JUAN CARLOS	□ viceit	2.1 TITI	ŀ	_	ر حي دوستان ر	1.000
NAME	1355 NW 154 EN.		2.2 NA	İ			
STREET ADDRESS	PEMBROKE PINES FL 33028			EET ADDRESS			
CITY-ST-ZIP	TEMBRIORE FRACO LE SOSES	☐ DELETE	3.1 TITI	Y-ST-ZIP		Change	Addition
TITLE NAME			3.2 NA		_	·	- 1
STREET ADDRESS				EET ADDRESS			1
CITY-ST-ZIP				Y-ST-ZIP			-
TITLE		DELETE	4.1 TIT			Change	Addition
NAME			4. 2 NA	- 1			
STREET ADDRESS			4.3 STF	REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	5.1 TIT			Change	Addition
NAME			5.2 NAI	VE	·		
STREET ADDRESS			5.3 STF	REET ADDRESS			İ
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP	·		
TITLE		DEL ete	6.1 T(T			Change	Addition
NAME			6.2 NAI	ME			
STREET ADDRESS			6.3 STF	REET ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y-ST-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 or supplemental annual report is true and recurate 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 receipt 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 attack ment with an address.