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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 1. Corporation Name

(9)

P.J. MOI	RALES TRUCKING, INC.						
Principal Place	of Business	Mailing Address				ENERG MYDNY GIWIY MYMYY AYDIY	OFFILLURI
28425 LINDENH ZEPHYRHILLS F		28425 LINDENHURST DR ZEPHYRHILLS FL 33544-2863			·		
					3. Date Incorporated or Qualified 04/18/1991	3a. Date of Last Re 04/29/1996	eport
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 59-3078522		plied For Applicable
Suite, Apt #, etc		Suile, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	dditional
City & State		City & State			6. Election Campaign Financing	\$5.00	
Z (p	Country	28 Zip	Counti	ſV	Trust Fund Contribution P This persecution has liability for in	Added to	
24	25 29 30		30	8. This corporation has liability for intangible tax under s. 199.03 Florida Statutes Yes		199.032,	
	9. Name and Address of Current	Registered Agent	a	1 Name	10. Name and Address of New Reg	istered Agent	
	Rales, pedro 25 Lindenhurst drive		8:		ress (P.O. Box Number is Not Acceptabl	-	
ZEPHYRHILLS FL 33544			6:	ļ	ress (F.O. Box Number is Not Acceptable	ө)	
				1		ler l 7in (
			B.	4 City		FL 85 Zip C	ode
SIGNATURE					poration submits this statement for the pution's board of directors. I hereby accept		registered
12.	Signature, typed or profest name of negistered agent OFFICERS AND		13.	uper erulangia ineg	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 Title		ADDITIONO/OFFINIALS TO OFFICE	☐ Change	Addition
NAME	MORALES, PEDRO		1.2 NAME	.			
STREET ADDRESS	28425 LINDENHURST DR		1.3 STRE	ET ADDRESS			
CITY-S1-ZIP	ZEPHYRHILLS FL	1.40		-ST-ZIP			
TITLE	ST	☐ DELETE 2.1				☐ Change	Addition
NAME	MORALES, MARIA J		2.2 NAMI			•	
STREET ADDRESS	28425 LINDENHURST DRIVE		2.3 STRE	ET ADDRESS			
CITY - ST - ZIP			2. 4 CITY			Change	Addition
TITLE			3.1 TITLE	•		C) Cusufis	Acountries
NAME STREET ADDRESS			3.2 NAMI	ET ADDRESS			
CITY - ST - ZIP			3.4. CITY	1			
TOLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADORESS			
CITY-S1-ZIP	······································		44 CITY	-ST-ZIP			
THLE		☐ DELETE	5 1 TITLE			Change	Addition
NAME			52 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIF				-ST-ZIP		Change	Addition
TITLE		F" DEFEIG	6.1 TITLE 6.2 NAM			Circuite	L., RUUIIIVII
NAME STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14. I do hereb information	n indicated on this annual report or su	pplemental annual report is t	fy for the extrue and ac	cemption state curate and tha	d in Section 119.07(3)(i), Florida Statutes at my signature shall have the same legal of as required by Chapter 607, Florida St	l effect as if made und	der oath: that