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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

(1)

PETE'S TRUCKING & DEMOLITION, INC.

FILED Feb 18 1998 8:00am Secretary of State



				1 1 1 1 1 1 1 1 1 1
Principal Place of Business	Mailing Address		-{	DIGH GIBN GIGN GHOU HOU
401 SW 74TH TERRACE 401 SW 74TH TERRACE PLANTATION FL 33317 PLANTATION FL 33317				
			DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address	·	04/27/1992 4. FEI Number	I Annels de For
├ ── `	26. Walning Address		65-0328512	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
 	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
	28		Trust Fund Contribution	Added to Fees
Zip Country	─ ¬ `	Country	8. This corporation owes or has paid the cu	_ ' _ "
24 25 9, Name and Address of Current R	29] 30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
RICCITELLI, MARIAN M 401 SW 74TH TERRACE				
PLANTATION FL 33317		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
		83		
		24 00	···	-11
		84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 are office or registered agent, or both, in the State of I	nd 607.1508, Florida Statutes, th	he above-named corp	oration submits this statement for the purpose of	f changing its registered
office or registered agent, or both, in the State of I agent. I am familiar with, and accept the obligation	-lorida. Such change was autho ns of, Section 607,0505, Florida	orized by the corporati . Statutes.	ion's board of directors. I hereby accept the app	pointment as registered
M. A		BON M. RICCI	TEUJ	
Signature, typed or printed harm, of registered agent an	d title if applicable (NO1E: Reg	istered Agent signature require	ed when reinstating) DATE	
12. OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE D NAME RICCITELLI, MARIAN M		1.1 TITLE		Change Addition
	i	1.2 NAME		
BLASITATION FI		1.3 STREET ADDRESS		
CITY-ST-ZIP PLANIATION PL		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	_	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE		3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS	į:	3.3 STREET ADDRESS		l
CITY-ST-ZIP		3.4. CITY-ST-ZIP		Para a second
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME	i	4, 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	•	5.2 NAME		C outdo C Modition
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TRILE		Change Addition
NAME				
STREET ADDRESS	■ 6	6.2 NAME		· · · · · · · · · · · · · · · · · · ·
SINCEL ADDRESS		6.2 NAME 6.3 STREET ADDRESS		ļ

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 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.

2/12/90