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

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 643438

FLORIDA TRANSPORTATION SERVICES, INC.

A POINT	THE RESTRICTION OF	TODE, HIV.				
Principal Place of Business 2049 S.E. 35 ST. P. O. BOX 22696 FORT LAUDERDALE FL 33335		Mailing Address 2049 S.E. 35 ST. P. O. BOX 22696 FORT LAUDERDALE FL 33335-2696		1 100110 21141 #1604 14144 01005 11101 10111	31811 81811 9791; 9181; 9181; 9181; <u>1</u> 981	
					3. Date Incorporated or Qualified 10/30/1979	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address 26		4. FEt Number 59-2152659	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip	Country		This corporation has liability for in	
24	25	29	30			Yes No
9. Name and Address of Current Registered Agent				Name	10. Name and Address of New Reg	Jistered Agent
	CORPORATION SYSTEM O S.PINE ISLAND ROAD		81			
	NTATION FL 33324		82	Street Addre	ess (P.O. Box Number is Not Acceptab	ıe)
			83			
			84	City		FL 85 7ip Code
office or re	egistered agent, or both, in the Star	te of Florida. Such change was	authorized by	the corporation	oration submits this statement for the poon's board of directors. I hereby accep	urnose of changing its registered
SIGNATURE	m familiar with, and accept the obli					
12.	Signature, typod or printed name of registered a OFFICERS A	ND DIRECTORS	18.	nt aignature require	nd when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECTORS IN 12
TITLE	PO	☐ DELETE	1.0 TITLE			Change Addition
NAME	GORMAN JR, JOHN C		1.2 NAME			
STREET ADDRESS			1.3 STREET	ADORESS		
CITY-ST-ZIP			1.4 CITY - S	1-7IP		
TITLE	STD	☐ DELETE	2.1 TITLE			Change Addition
NAME	PAG ALE OG ALFRAUE		2.2 NAME			
STREET ADDRESS	720 N.E. 20 AVENUE FT. LAUDERDALE FL		23 STREET			
CITY-ST-ZIP			2 4 CITY-5	ST-ZIP		Change Addition
TITLE			31 TILLE			Change Modition
NAME STREET ADDRESS	I ∴		3.2 NAME	Athropies		
CITY-ST-ZIP	3		3.3 STREET 3.4. CITY-5	1		
TITLE			4.1 TITLE	51-21-		Change Addition
NAME			4. 2 NAME			2.00
STREET ADORESS				ADDRESS		
CITY-ST-ZIP			4.4 CITY-S			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADORESS		
CITY-ST-ZIP			5.4 CHY-S			
TITLE			6 1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET	ADDRESS		

14. I do 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.