

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 3:09

DOCUMENT # **G07145** (7)
1. Corporation Name
TRINITY TRANSPORT, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
1801 SW 1 AVE 1801 SW 1 AVE
P. O. BOX 350524 P. O. BOX 350524
FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315

3. Date Incorporated or Qualified **11/04/1982** 3a. Date of Last Report **03/04/1994**
4. FEI Number **59-2246006** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 Zip 29 Country 30

9. Name and Address of Current Registered Agent
PESTCOE, BERNARD C.
169 E FLAGLER ST., #1500, ALFRED I. DUPONT BLD
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY - ST - ZIP
VD **WEAVER, EVELYN L.**
151 S.W. 61ST AVE.
PLANTATION FL
ST **WEAVER, RODNEY E**
5561 SW 11 TERR
COOPER CITY FL
PD **WEAVER, RUSSELL E.**
151 SW 61 AVENUE
PLANTATION FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE Change Addition
2.2 NAME **ST WEAVER, RODNEY E**
2.3 STREET ADDRESS **5561 SW. 112 TERR**
2.4 CITY - ST - ZIP **COOPER CITY, FL**
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: Evelyn L. Weaver - EVELYN L. WEAVER 2-2-95 305462-5022
(Signature) (Date) (Taxpayer ID Number)