

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90041 017 ***150.00

DOCUMENT # G09210

1. Entity Name

TRANSPORTATION SAFETY CONTRACTORS, INC.

Principal Place of Business

Mailing Address

1200 LANDMARKS CTR
 SUITE 1300
 OMAHA NE 68102
 US

1200 LANDMARKS CTR
 SUITE 1300
 OMAHA NE 68102-1880
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2234741

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POLLOCK, EDWARD Z ESQ
ABLE TELCOM HOLDING CORP
1601 FORUM PL STE 1110
WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
CD	RAY, BILLY V JR	1601 FORUM PLACE SUITE 1110	WEST PALM BEACH FL 33401				
P	BARRY HALL, JAMES	1601 FORUM PLACE SUITE 1110	WEST PALM BEACH FL 33401				
T	ARP, MICHAEL	1601 FORUM PLACE SUITE 1110	WEST PALM BEACH FL 33401				
S	TERRERO, ELIZABETH	1601 FORUM PLACE SUITE 1110	WEST PALM BEACH FL 33401				

13. 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 report or supplemental 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 11 or Block 12, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-00

(402) 233-7651

Date

Daytime Phone #