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

0240640

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 11, 1999 8:00 am
Secretary of State
05-11-1999 90030 030 ***150.00

DOCUMENT # K60017

1. Corporation Name

EAST FLORIDA TRANSPORT, INC.

Principal Place of Business	Mailing Address
~~300 ROCHESTER BUILDING~~ ~~8390 N.W. 53RD STREET~~ ~~MIAMI FL 33166~~	~~300 ROCHESTER BUILDING~~ ~~8390 N.W. 53RD STREET~~ ~~MIAMI FL 33166~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
01/18/1989

2. Principal Place of Business	2a. Mailing Address	4. FEI Number		Applied For
21 East Florida Transp. Inc	East Florida Transp.	65-0250991		Not Applicable

Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 7227 NW 29th Ave	27 7227 NW 29th Ave	5. Certifcate of Status Desired ☐	**$8.75** Additional Fee Required

City & State	City & State	
23 Miami, Fl.	28 Miami Fl.	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees

Zip	Country	Zip	Country	
24 33147	25	29 33147	30	8. This corporation owes the current year Intangible Personal Property Tax. ☐Yes ☐No

9. Name and Address of Current Registered Agent

ACUNA, JESUS R.
7227 NW 29TH AVE
MIAMI FL 33147

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 _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD ☐ DELETE	1.1 TITLE	☐ Change	☐ Addition
NAME	ACUNA, JESUS R.	1.2 NAME		
STREET ADDRESS	7227 NW 29TH AVENUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP		
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change	☐ Addition
NAME	ACUNA, DOMINGO	2.2 NAME		
STREET ADDRESS	7227 NW 29TH AVE	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	☐ Change	☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	☐ Change	☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change	☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE: _____   4/30/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E034 (11/98)