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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Apr 20 1998 8:00am Secretary of State

	1998	DIVISION OF C	ORPORATION	NS) Scorciary (JI DU	acc	
	MENT # K6445 RANSPORTATION, INC.	57 (0)			4 128 (B)(1) 8/10 23/13 D)(8/1) 6/18/1 6/1/11 18/2/ 6/2/1	FIF 2(B)) Alani Ala	il 8161) (#21	
						<i>ii ii</i> ii		
Principal Place of Business Mailing Address GRUMER, KEITH T. ONE EAST BROWARD BLVD., SUITE 1705 ONE EAST BROWARD BL				05				
FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 3330 US US			01	DO NOT WRITE IN THIS SPACE				_
US		US			3. Date Incorporated or Qualified 02/09/1989			
2. Principal Pi	lace of Business	2a. Mailing Address		-78			plied For	┨
21		26			65-0121597	Not Applicable		
Suite, Apt	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Security Securi			
City & State	9	City & State			6. Election Campaign Financing	\$5.00		d
23	•	28			Trust Fund Contribution	Added t		
Zip	Country	Zip	Country		8. This corporation owes or has paid the ci			1
24	9. Name and Address of Curre		30		Personal Property Tax due June 30. 10, Name and Address of New Registered] No	4
GD	UMER, KEITH T	aur wagierarad wgant	81	Name	10. Name and Address of New Registered	1 WBeur		1
	IE EAST BROWARD BLVD.				100 D. N			
	ITE 1705		82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
FT.	LAUDERDALE FL 33301		83					1
			84	City		85 Zip (Code	1
4 6		100 - 1 CO7 4/ CO 5/ 1 Chan	1 1	•	FI	_ '		1
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was a	uthorized by t	named corp he corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as	registered registered	
	m tamiliar with, and accept the obli	gations of, Section 607,0505, Fig.	noa Statutes.					-
SIGNATURE	Signature, typiid or printed name of registered a	igent and title if applicable (NOTE	Registered Agent	signature requir	red when reinstaling) DATE			ا
12.		OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AN			16
T:TLE NAME	PD Hidalgo, exzun L	☐ DELETE	1.1 TITLE			L Change	Addition	2
STREET ADDRESS	90 NW 137TH AVE.		1.2 NAME 1.3 STREET AL	nnesee				8
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP					12
TITLE	STD	☐ DELETE	21 TITLE		······································	Change	Addition	2
NAME	AZOR, JORGE E.		2.2 NAME	į.				-
STREET ADDRESS	90 NW 137TH AVE.		2.3 SYREET AL	DORESS				
CITY-ST-ZIP	MIAMI FL		2.4 CITY - ST-	ZIP			The state of	4
TITLE		☐ DELETE	3 1 TITLE		•	Change	Addition	
NAME STREET ADDRESS	1		3.2 NAME 3.3 STREET AD	IDRESS				1
CITY-ST-ZIP			3.4. CITY-ST-	1				1
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition	1
NAME			4. 2 NAME	ļ				1
STREET ADDRESS			4.3 STREET AL	DDRESS				1
CITY-ST-ZIP		T priest	4.4 CITY - ST - ZIP		·····	(Observed	A seller an	4
TITLE		☐ DELETE	5.1 TITLE			∐ Change	☐ Addition	1
NAME Street Address			5.2 NAME 5.3 STREET ADDRESS					1
CITY - ST - ZIP			5.4 CITY-ST-	ì				1
TIFLE		DELETE	6.1 TITLE			Change	Addition	1
NAME			6.2 NAME	-				
STREET ADDRESS			63 STREET AC	DORESS	,			
CITY-ST-ZIP		A	6.4 CITY-ST-		S-10-140 07/0V0 51-13-0 14-1		information	1
indicated	ermy that the information supplied on this annual report or supplem <u>e</u> c	with this filling does not qualify to ital physical report is true and accu	ritie exemptic Irate and that	лі stated in my signatui	Section 119.07(3)(i), Florida Statutes. I further or re shall have the same legal effect as if made u	certify that the inder oath; tha	information at I am an	

by your report is true and accurate and mat my signature shall have the same legal of the control of trustee empowered to execute this report as required by Chapter 607, Florida'S accument with an address. officer or director of the corporation or the re-Block 12 or Block 13 if changed, or on an all

SIGNATURE: