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

PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # **K65413**

TRANSPORT SYSTEMS SPECIALISTS, INC. Mailing Address Principal Place of Business 2483 N.W. 39TH STREET 2483 N.W. 39TH STREET **BOCA RATON FL 33431** BOCA RATON FL 33431-5441 3. Date Incorporated or Qualified 3a. Date of Last Report 04/25/1996 02/14/1989 2a. Mailing Address 26 PO Box 8/673/ 4. FEI Number 2. Principal Place of Business Applied For 65-0114943 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be BOCA RATON П 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation has liability for intangible taxjunder s. 199.032, 33481-0731 Yes No 24 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REY, PETER J. 2483 N.W. 39TH STREET 62 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City 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 fafility wife, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) int and title if applicable fine of regWered puint and liftle if applica OFFICERS AND DIRECTORS (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE REY. PETER J. 1.2 NAME NAME 2483 N.W. 39TH ST. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZII Change DELETE Addition TITLE 2.1 TITLE REY, THERESA A. NAME 2.2 NAME 2483 NW 39TH STREET STREET ADDRESS 23 STREET ADDRESS **BOCA RATON FL** CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition THE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-7IP CITY-ST-ZIE DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHTY-ST-ZIP CITY-S1-ZIP DELETE Change Addition | TITLE 5.1 THLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 6 1 TITLE TITLE 62 NAME NAME

> 63 STREET ADDRESS 6.4 CITY-ST-ZIP

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

SIGNATURE:

STREET ADDRESS

CITY-ST-7:P

appears in Block 12 or Block 13 if changed for on an attachment with an address.

FILED

Apr 17 1997 8:00am

Secretary of State

CR2E034