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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000058041 (3)

ECCLES TRANSPORT, INC.

Principal Place of Business Mailing Address 830 S.W. 113TH TERRACE PEMBROKE PINES FL 33025 PEMBROKE PINES FL 33025									
						3. Date Incorporated or Qualified 08/18/1993		ate of Last R 17/1996	leport
्2. Principal Pi 21	lace of Business	2a, Mailing Address 26				4. FEI Number 65-0435724		 	oplied For ot Applicable
Suite, Apt -		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be
Zip	Country	Zip Country				Trust Fund Contribution Added to Fees 6. This corporation has liability for intengible tax under s. 199.032,			
24	25 29 30		30			Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered /	Agent	
	LES, HALLSAL S		J	81	Name				J
630 S.W. 113TH TERRACE PEMBROKE PINES FL 33025				82	Street Add	ess (P.O. Box Number is Not Acceptable)			
			Ţ	83		- 10 C PS - 10 C			
			1	84	City		FL	85 Zip (Code
office or re agent. La: SIGNATURE	egistered agent, or both, in the State o m familiar with, and accept the obligat	f Florida. Such change was ions of, Section 607.0505, f	authorized Iorida Statu	l by t utes.	the corpore	poration submits this statement for the particular to the particul	ot the app	changing it ointment as	is registered registered
	Signature, typed or printed name of registered agent OFFICERS AND			Agen	t signature requ	rired when reinstating)	DATE	N DIDECTOR	20.81.40
12.	PTD OF ICERS AND	DELETE	13.	15		ADDITIONS/CHANGES TO OFFIC	EHS AND	Change	Addition
NAME	ECCLES, HALLSAL S		12 NA					C Change	L_ Addition
STREET ASIDRESS	630 S.W. 113TH TERRACE		- 1		DDDECC				1
CHY-\$1-ZIP	PEMBROKE PINES FL 33025			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
704E	SVD	DELETE		2.1 TITLE				Change	Addition
NAME:	ECCLES, MARY A	 -	2.2 NAME					-	
STREET ADDRESS	630 S.W. 113TH TERRACE		2.3 STI	REET A	ADDRESS				
CITY-S1-ZIP	PEMBROKE PINES FL 33025		2. 4 CI	TY-\$T	r-ZIP		H jr		ŀ
TITLE		DELETE	3.1 TITLE				****	Change	Addition
*NAME			. 3.2 NA	ME					ļ
STREET ADDRESS			3.3 ST	REET A	ADDRESS .				}
CITY-ST 7.5			3 4. DF		r-ZIP	· · · · · · · · · · · · · · · · · · ·			
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NAME			4. 2 NA						
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"IJTLE		DELETE	51 TIT					☐ Change	Addition
NAME			5.2 NA		000000				J
STHEET ADDRESS					ADDRESS				ļ
CIFY-S1-ZIF		54C			- ZIP			Change	Addition
TITLE None at		□ orcf.)¢	61 TIT		- 1			- Crembs	L AUGINOSI
NAME CHARLES ASSESSED			62 NA		LDODECC				
STREET ACORESS			6.3 \$11	ntti A	ADORESS				

14. I do hereby certily 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. - A. Eccles Mary A. Eccles 3/14/97
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / A. Eccles 3/14/97 SIGNATURE:

FILED

Apr 08 1997 8:00am

Secretary of State