

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

MAY 18 AM 10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000022011 (8)**

1. Corporation Name

**ANYWHERE TRANSPORT, INC.**

Principal Place of Business

Mailing Address

**3808 DR. MARTIN LUTHER KING, JR., BLVD.  
TAMPA FL 33610**

**3808 DR. MARTIN LUTHER KING, JR., BLVD.  
TAMPA FL 33610**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/22/1994** 3b. Date of Last Report

4. FEI Number **59-3232886** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

25 State, Apt. #, etc.

22 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMATO, JOHN E  
3808 DR. MARTIN LUTHER KING, JR., BLVD.  
TAMPA FL 33610**

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 607.0503 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

By (24) (25) (26) (27) (28) (29) (30) (31) (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (00)

By (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (00)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE **D**  
12.2 NAME **AMATO, JOHN E**  
12.3 STREET ADDRESS **9306 WOODBAY DR.**  
12.4 CITY, ST., ZIP **TAMPA FL 33626**

13.1 TITLE  Change  Addition  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY, ST., ZIP

12.1 TITLE **D**  
12.2 NAME **BAEZA, DARIO B**  
12.3 STREET ADDRESS **20321 NW 3RD ST.**  
12.4 CITY, ST., ZIP **PEMBROKE PINES FL 33024**

13.1 TITLE  Change  Addition  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY, ST., ZIP

12.1 TITLE  
12.2 NAME  
12.3 STREET ADDRESS  
12.4 CITY, ST., ZIP

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13.4 CITY, ST., ZIP

12.1 TITLE  
12.2 NAME  
12.3 STREET ADDRESS  
12.4 CITY, ST., ZIP

13.1 TITLE  Change  Addition  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY, ST., ZIP

14. I do hereby certify that the information required with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 199.032(9)(b), 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. I am an officer or director of the corporation or the person or persons responsible to oversee the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or as an addendum with an address.

SIGNATURE: *John E Amato*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

5-15-95 813-626-2885  
DATE TELEPHONE NUMBER