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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P96000003859 (1)

DOCKSIDE TRANSPORTATION CORP.

FILED Mar 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- I HARDINDAN NIN IDNIN DIKKI DONNI DONNI DONKI DEKIK DONDO FINDU FORDY QUYAD KONI RODU		
3601 N.W. 62ND STREET 9801 NW 106 ST MIAMI FL 33147 MEDLEY FL 33178 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	_	
						01/09/1996		
	lace of Business	2s. Mailing Address				4. FEI Number Applied For	_	
	N.W. 106th ST.	26				65-065 1680 Not Applicab	le	
Suite, Apt.		Suite, Apt #, etc.				5. Certificate of Status Desired See Required Fee Required		
City & State	City & State	y & Stato			6. Election Campaign Financing \$5.00 May Be			
Zip	EDLEY , FL 33178 28 Zip Country Zip Co		T	Trust Fund Contribution Added to Fees Country S This corporation owes or has paid the current year Intendible		4		
24		<u> </u>	—			8. This corporation owes or has paid the current year Intangible		
29	9. Name and Address of Current	25 Miami - Dade 29 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
FORMAN, TERRY J 81						10. Traine and Pauloss of Front Hoggstore Agent	ᅥ	
1521 S.W. LEJEUNE ROAD				82	Street Addres	ddress (P.O. Box Number is Not Acceptable)		
"	PRAL GABLES FL 33134		83				\dashv	
			1	84	City	FL 85 Zip Code	7	
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 agont, 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			Agen	t signature required		_	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD NOVO OFORCE	☐ DELETE	1.1 TITO			Change Addition	n	
NAME OTOTET ADDOLOG	NOVO, GEORGE		1.2 NA				- 1	
STREET ADDRESS City-St-Zip	3601 N.W. 62ND STREET MANUEL 33147				VDDAESS 98	301 N.W. 106th StMedley, F1 33178	-	
TITLE		DELETE	1.4 CIT 2.1 TITL		-211	Change Additio	\exists	
NAME	FORMAN, TERRY J	□ otterit	2.2 NAM			C crange D Addition	" [
STREET ADDRESS	1521 SW LEJEUNE ROAD				VDDRESS		- 1	
CITY-ST-ZIP	CORAL GABLES FL 33134		2.4 CIT					
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STREET ADORESS			4.3 STR	EET A	DDRESS			
CITY-ST-ZIP			4.4 CITY	r-ST-	- ZIP		-	
TITLE		☐ DELETE	5.1 TITL	.E		Change Additio	╗	
NAME			5.2 NAN	ΑE				
STREET ADDRESS			5.3 S1R	EET A	DORESS			
CITY-ST-ZIP		<u> </u>	54 CITY	Y-ST-	- ZIP		┙	
TITLE		☐ DELETE	6 1 TITL	E		☐ Change ☐ Addition	'n	
NAME			6.2 NAN		-			
STREET ADDRESS					DDAESS			
CITY - ST - ZIP			6.4 CiT	(- ST-	- ZIP		_	
14. I nereby c	eriny that the information supplied with	n triis tiling does not qualify f	or the exer	nplik	on stated in Si	ection 119.07(3)(i), Florida Statutes, I further certify that the information	٠L	

eport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an istory empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in in a cidress.

(305) 863.0040