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

**PROFIT CORPORATION** ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V46920

TRANSPORT REFRIGERATION SERVICES, INC.

**FILED** Apr 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					T HORAL MITORI GLOVE MINIO SHIFT (1981) AND	i Airti Dibit Airti A		AVEL INAL
9325 W OKE	ECHOBEE RD	P O BOX 136762						
BAY #8 HILEAH FL 33012					DO NOT WRITE IN THIS SPACE			
MILEAH FL 33016 US					3. Date Incorporated or Qualified	IN THIS STACE		<del></del>
					06/23/1992			
2. Principal F	Place of Business	2a. Mailing Address		4 0	4. FEI Number		Ap	plied For
21		26 PUBOX	<u> 267</u>	(e)	65-0344502		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 A	dditional quired
City & Stat	te	City & State			6. Election Campaign Financing			Мау Ве
Zip	Country	28 HIAICAN	Country		Trust Fund Contribution		dded to	
24	25	<del>├</del> ┓ '	30	,	8. This corporation owes or has pail Personal Property Tax due June			ingible No
47	Name and Address of Currer		30]		10. Name and Address of New Rec			, 110
GONZALEZ, MARIAN				Name				
3650 SOUTHWEST 139 AVENUE				Street Add	dress (P.O. Box Number is Not Acceptable	Jo)		
MIRAMAR FL 33027				Stibbli Auc	desay (7. O. Dox (admine) is 140 Acceptable			
			83					
			84	City		85	Zip C	eho:
				,		FL 🗀	,	
agent. I a	Signature, typod or printed name of registered ago	and fire if appreatite (NOTE			rporation submits this statement for the pration's board of directors. I hereby acception when reinstaling	DATE	, in as i	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	PTD	[ DELETE	1,1 TITLE			☐ Cr	ange	☐ Addition
NAME	SOFO ON ADOTH ALPHUE		1.2 NAME	<b>\</b>				
STREET ADDRESS	44944466		1.3 STREET					
CITY-ST-ZIP TITLE	VSD	DELETE	1.4 CITY - S 2.1 TITLE	ST - ZIP		□ Cr		Addition
NAME	GONZALEZ, MARIAN	בן מונים בן	2.1 MLC	}			mile	
STREET ADORESS	3650 SW 139TH AVENUE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	MIRAMAR FL		2 4 CITY-:	1.00				
TITLE		DELETE	3.1 TITLE	<u> </u>		Cr	nange	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP				
TITLE	DELETE 4.1		4.1 TITLE			Ct	lange	Addition
NAME			4. 2 NAME	Ì				
STREET ADDRESS	ŀ		4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	T-ZIP				
TITLE		DELETE	5.1 TITLE	ļ		CH	iange	Addition
NAME			5.2 NAME	ĺ				

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

DELETE

U.0.90

Change

Addition