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

Apr 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # 174619 (7) TRANSPORT REALTY CO. Principal Place of Business Mailing Address P.O. BOX 245 P.O. BOX 245 12805 N.W. 42 AVE. 12805 N.W. 42 AVE. OPA LOCKA FL 33054 OPA LOCKA FL 33054 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1953 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-0871070 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ALTERMAN, SIDNEY 12805 N.W. 42 AVE 82 Street Address (P.O. Box Number is Not Acceptable) OPA LOCKA FL 33054 вз 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE ALTERMAN, BRYAN S. NAME 1.2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 1.3 STREET ADDRESS **OPA LOCKA FL** CITY - ST - ZIP 1.4 CITY-ST-ZIP Change TITLE PD DELETE 2.1 TITLE ... Addition ALTERMAN, SIDNEY NAME 2.2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 2.3 STREET ADDRESS **OPA LOCKA FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITL F 317016 LIMGNI, ROY NAME 3.2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 3.3 STREET ADDRESS OPA LOCKA FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE ALTERMAN, RICHARD C. NAME 4. 2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 4.3 STREET ADORESS **OPA LOCKA FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE ROARK, VERMON NAME 5.2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 5.3 STREET ADDRESS **OPA LOCKA FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE ALTERMAN, JOHN NAME 6.2 NAME 12805 N.W. 42ND AVE. STREET ADDRESS 6.3 STREET ADDRESS **OPA LOCKA FL** CITY - ST - ZIP 64 CITY-ST-ZIP 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 attaching it with an address.

SIGNATURE:

FILED

4/24/98 (205) 688-3571