

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Laura B. Mather
Secretary, 1996
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **248293** (3)

To: Corporation Name

OK STORAGE & TRANSFER CO., INC.

APPROVED
AND
FILED
MAY 10 1995
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Principal Place of Business

4200 NW 73 AVENUE
MIAMI FL 33166

Managing Office

4200 NW 73 AVENUE
MIAMI FL 33166

DATE OF WORKING PAPER FILING

3. Date incorporated or organized: **05/05/1961** 3a. Date of Last Report: **05/01/1994**

4. FIC Number: **59-0932838** Applied For: Not Applicable:

5. Condition of Report Required: **\$8.75 Additional Fee Required**

6. Filing Fee (per page for printed report) **\$5.00 May Be Added to Fees**

6. Filing Fee (per page for computerized report)

21. Term of Report of Evaluation	26. Main Address
22. State	27. City
23. State	28. City
24. State	29. City
25. State	30. City

9. Name and Address of Current Registered Agent

BARNETT, A.W.
4200 NW 73 AVE.
MIAMI FL 33166

10. Name and Address of New Registered Agent

81. Name	
82. Address	
83. City	
84. State	FL
85. Zip Code	

11. I, the undersigned, certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am qualified to act as a registered agent for the corporation named herein.

12. Name and Address of Officers and Directors

1201	D KEMP, DOROTHY 4200 NW 73 AVE. MIAMI FL
1202	PD BARNETT, A.W. 4200 NW 73 AVE. MIAMI FL
1203	DVP KEMP, STUART P. 4200 NW 73 AVE. MIAMI FL
1204	
1205	
1206	
1207	
1208	
1209	
1210	
1211	
1212	
1213	
1214	
1215	
1216	
1217	
1218	
1219	
1220	

13. Name and Address of Officers and Directors

1301	Chairman of the Board	<input checked="" type="checkbox"/>
1302		<input type="checkbox"/>
1303		<input type="checkbox"/>
1304	Secretary/Treasurer	<input checked="" type="checkbox"/>
1305		<input type="checkbox"/>
1306		<input type="checkbox"/>
1307		<input type="checkbox"/>
1308		<input type="checkbox"/>
1309		<input type="checkbox"/>
1310		<input type="checkbox"/>
1311		<input type="checkbox"/>
1312		<input type="checkbox"/>
1313		<input type="checkbox"/>
1314		<input type="checkbox"/>
1315		<input type="checkbox"/>
1316		<input type="checkbox"/>
1317		<input type="checkbox"/>
1318		<input type="checkbox"/>
1319		<input type="checkbox"/>
1320		<input type="checkbox"/>

14. I, the undersigned, certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am qualified to act as a registered agent for the corporation named herein.

SIGNATURE: *A Wayne Barnett*
A Wayne Barnett, President
SIGNATURE AND TITLE OF REGISTERED AGENT OR REGISTERED OFFICER OF THE CORPORATION

4/3/95 305-593-8244

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

REGISTRATION
 1995



FLORIDA DEPARTMENT OF STATE
 1700 North West 25th Street
 Tallahassee, Florida 32304-0001

DOCUMENT # **250390**

(2)

PEL CORPORATION

APPROVED

08/18/1994

TALLAHASSEE, FLORIDA

1431 MILLER ROAD
 CORAL GABLES FL 33146

1431 MILLER ROAD
 CORAL GABLES FL 33146

STATE OF FLORIDA

3. Date of Incorporation (or Date of Organization)	3a. Date of Last Report
08/18/1961	04/20/1994
4. FEI Number	Amount For Not Applicable
59-0972066	
5. Contribution of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Exclusion Categories (Indicate by Initials of Contributor)	\$5.00 May Be Added to Fees
6. Exclusion Categories (Indicate by Initials of Contributor)	
Foreign Status: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Name of Corporation	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PELLICANE, ANTHONY J.
 1431 MILLER ROAD
 CORAL GABLES FL 33146

61. Name	65. State
62. Street Address (or P.O. Number, if Not Applicable)	FL
63.	
64. City	

11. I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the information required by this form, and that the same is true to the best of my knowledge and belief.

Subscribed and sworn to before me this _____ day of _____, 1994.

12. Name of Agent	13. Authority (See Manual for Authority Code)
PD PELLICANE SR, ANTHONY J 1431 MILLER ROAD CORAL GABLES FL	
D PELLICANE JR, ANTHONY J 1431 MILLER ROAD CORAL GABLES FL	

14. I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the information required by this form, and that the same is true to the best of my knowledge and belief.

SIGNATURE: *Anthony J. Pellicane* Anthony J. Pellicane 5/1/95

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

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
CORPORATION
TALLAHASSEE, FLORIDA

APPROVED
4/23/95

DOCUMENT # **255023**

(4)

COMMENCED: 04/11/95

1. Corporation Name
FLORIDA SITES, INC.

2001 GLENDALE AVENUE
TALLAHASSEE, FLORIDA

2. Principal Office Location
**2255 GLADES ROAD #219A
SUITE 200
BOCA RATON FL 33431**

3. Mailing Office Location
**2255 GLADES ROAD #219A
SUITE 200
BOCA RATON FL 33431**

4. Telephone Number (Include Area Code)

5. Filing Period (Month and Year)
01/17/1962

6a. Date of Last Report
05/01/1994

7. Filing Period (Month and Year)

8. Filing Period (Month and Year)

9. Filing Period (Month and Year)
59-0947497

10. Filing Period (Month and Year)

11. Filing Period (Month and Year)
SUITE 219A

12. Filing Period (Month and Year)
SUITE 219A

13. Filing Period (Month and Year)

14. Filing Period (Month and Year)
\$8.75 Additional Fee Required

15. Filing Period (Month and Year)

16. Filing Period (Month and Year)

17. Filing Period (Month and Year)

18. Filing Period (Month and Year)
\$5.00 May Be Added to Fees

19. Filing Period (Month and Year)

20. Filing Period (Month and Year)

21. Filing Period (Month and Year)
 Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KNIGHT, WILLIAM L.
2255 GLADES ROAD
SUITE 219A
BOCA RATON FL 33431**

81. Name
82. Street Address, City, State, Zip, and Country
83.
84. State

FL 85. State

11. If the corporation is a foreign corporation, the name and address of the principal office of the corporation in the United States, and the name and address of the principal office of the corporation in the United States, and the name and address of the principal office of the corporation in the United States.

12. PDC
**KNIGHT, WILLIAM L.
2255 GLADES RD #219A
BOCA RATON FL 33431**
VST
**KNIGHT, JAMES W.
2255 GLADES RD #219A
BOCA RATON FL 33431**

13. Additional Information (Include Name, Address, Telephone Number, and State)

14. If the corporation is a foreign corporation, the name and address of the principal office of the corporation in the United States, and the name and address of the principal office of the corporation in the United States, and the name and address of the principal office of the corporation in the United States.

SIGNATURE:

William L. Knight

WILLIAM L. KNIGHT

4/25/95

(407) 241-1000