

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 330428 (4)

1. Corporation Name

INTERNATIONAL TRUCKING & RIGGING CO., INC.



Principal Place of Business

6175 NW 153 ST #321
MIAMI LAKES FL 33014

Mailing Address

6175 NW 153 ST #321
MIAMI LAKES FL 33014

3. Date Incorporated or Qualified
05/22/1968

3a. Date of Last Report
03/10/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1209709

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 s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIPP, RICHARD L. SR.
6175 NW 153 STREET
321
MIAMI LAKES FL 33014

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 607.0502 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 date if applicable

(If 11) Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME KIPP, RICHARD L. SR.
STREET ADDRESS 14830 LEWIS RD.
CITY-STATE-ZIP MIAMI LAKES FL

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP 33014

TITLE VD ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME KIPP, RICHARD L. JR.
STREET ADDRESS 14520 HAMPTON PL.
CITY-STATE-ZIP DAVIE FL

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP 33325

TITLE D ☐ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME KIPP, ANN
STREET ADDRESS 14830 LEWIS RD.
CITY-STATE-ZIP MIAMI LAKES FL

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP 33014

TITLE ST ☐ DELETE

4.1 TITLE ☐ Change ☒ Addition

NAME KIPP, ANN
STREET ADDRESS 14830 LEWIS RD.
CITY-STATE-ZIP MIAMI LAKES FL

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP 33014

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 unchanged, or on an attachment with an address.

SIGNATURE:

Ann Kipp
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANN KIPP, SECRETARY/TREASURER 1/22/96 305/556-9203

Date

Daytime Phone #

CR2E034 (12/95)