

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 507446 (3)
 1. Corporation Name
NATIONWIDE TRUCKING, INC.



Principal Place of Business 2600 N.W. 78TH AVENUE MIAMI FL 33122	Mailing Address 2600 N.W. 79TH AVENUE MIAMI FL 33122
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/14/1976	3a. Date of Last Report 05/01/1995
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-1908988		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent PRICE, WALTER STEVEN 16507 BRIDGE END RD. MIAMI LAKES FL 33014				10. Name and Address of New Registered Agent	
81 Name RICHARD B. AUSTIN				85 Zip Code 33166	
82 Street Address (P.O. Box Number is Not Acceptable) 8390 N.W. 53 ST. #300					
83 City MIAMI					

11. Pursuant to the provisions of Sections 607.0507 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]*
 Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	PRICE, WALTER STEVEN		1.2 NAME	PRICE, WALTER STEVEN	
STREET ADDRESS	16507 BRIDGE END RD.		1.3 STREET ADDRESS	8390 RIVERA COURT	
CITY - ST - ZIP	MIAMI LAKES FL		1.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33332	
TITLE	VD	☐ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	PRICE, WALTER STEVEN		2.2 NAME	PRICE, WALTER STEVEN	
STREET ADDRESS	16507 BRIDGE END RD.		2.3 STREET ADDRESS	8390 RIVERA COURT	
CITY - ST - ZIP	MIAMI LAKES FL		2.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33332	
TITLE	ST	☐ DELETE	3.1 TITLE	ST	☒ Change ☐ Addition
NAME	PRICE, WALTER STEVEN		3.2 NAME	PRICE, WALTER STEVEN	
STREET ADDRESS	16507 BRIDGE END RD.		3.3 STREET ADDRESS	8390 RIVERA COURT	
CITY - ST - ZIP	MIAMI LAKES FL		3.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33332	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attachment with an address.

SIGNATURE: *[Signature]* **WALTER S. PRICE 6-19-96**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)