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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90198 039 ***150.00

\Box	OCUMENT #	[‡] 622192
1.	Corporation Name	

TRANSPORTATION CORPORATION

Principal Flace of	of Business	Mailing Address				168 BILLO 1986 1188: 11818 14	110 1101 BINES	411 81811 81811 I	
798 S FEDERAL F	I WY	798 \$ FEDERAL HWY			ļ				
P.O. DRAWER 40		P.O. DRAWER 40			DO NOT WRITE IN THIS SPACE				
BOCA RATON FL	33432	BOCA RATON FL 33432 US			3 Date Inco	orporated or Qualifed	172 114 11.10		
03		00			05/18/				
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Num			Ap	stied For
21		26			59-203	0442		No	Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5 Contife at	e of Status Desired		\$8.75	
22		27			5. Cerincal			Fee Re	quired
City & State		City & State			6. Election	Campaign Financing		\$5.00	• 1
23						nd Contribution		Added	o Fees
Zip	Country	Zip	Country		,	oration owes the curr	rent year Inta	angible ☐ Yes	□No
24	25	29	30			Property Tax. nd Address of New F	Registered A		
	9. Name and Address of Curren	ni Registered Agent	81	Name	10, Italiie ai	Id Address of New .	tegistoria		
OSBO	rne, ray, c		L						
	FEDERAL HWY		82	Street	Address (P.O. Bo). N	lumber is Not Accepta	able)		Į
SUITE	100		83						
BOCA	RATON FL 33432		L					1	
			84	City			FL	85 Zip	Code
11. Pursuant to	the provisions of Sections 607.056	02 and 607.1508, Florida Statu	tes, the above	e-named	ccrporation submi s	this statement for the	purpose of	changing its	egistered
office /it rea	ine provisions or sections 607.050 pistered agent, or both, in the State familiar with, and accept the obliga	ort Florida, Such change was	authorized by	the corp	oration's board of dir	ectors. I hereby acce	pt the appoir	ntment as re	gistered
1	Tairilla: Willi, and accept the obliga	acons of, occupin our soud, in	37.00 0101010						
SIGNATUFE SI	gnature, typed or printed na ne of registered age	and title if applicable. (NOT	E: Registered Age	nt signature	equired when reinstating)		DATE		
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITION	IS/CHANGES TO OF	FICERS AN	D DIRECTO	1DS IN 12
TITLE !!					ABBITION	10,01,,410,00			
1	DP	☐ DELETE	1.1 TITLE		ADDITION	10/01/4/1/02/2 1.5 0		Change	Addition
NAME	OSBORNE, RAY C.		1.1 TITLE 1.2 NAME		ADDITION	100 * 1100 - 100			
NAME STREET AODRE 3S	OSBORNE, RAY C. 798 S FEDERAL HWY		1.1 TITLE 1.2 NAME	TADDRESS	ADDITION				
NAME STREET ADDRE 3S CITY-ST-ZIP	OSBORNE, RAY C. 798 S FEDERAL HWY BOCA RATON FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S		ADDITION			Change	☐ Addition
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NAME STREET AODRESS CITY-ST-ZIP TITLE NAME	Osborne, Ray C. 798 S Federal Hwy Boca Raton Fl S Jones, Wendy H	☐ DELETE	1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 2.2 NAME	T- ZIP	ADDITION			Change	☐ Addition
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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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF SIGNING OFFICER OR DIRECTOR