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

PROFIT
CORPORATION
ANNUAL REPORT

1997

Principal Place of Business

HIALEAH GARDENS FL 33016

11554 N.W. 88 AVE.



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 697818

(3)

Mailing Address

11554 N.W. 88 AVE.

HIALEAH GARDENS FL 33018-1962

TAPANES & SONS TRUCKING SERVICES, INC.

| | | | | | 3. Date Incorporated or Qu 08/06/1981 | | Date of Last Report 1/30/1996 | |
|---|---|---|------------------------------|------------------------------|--|---|---|--|
| 6 Octobries (1) | (D) | 2a, Mailing Address | | | 4. FEI Number | | Applied For | |
| 2. Principal Flace of Business | | 26. Washing Address | | 59-2109818 | | Not Applicable | | |
| Suite Apt #. etc. | | Suite Apt. #, etc. | | | | | \$8.75 Additional | |
| | | 27 | | 6. Certificate of Status Des | sired 🔲 | Fee Required | | |
| City & State |) | City & State | | | 6. Election Campaign Finar | noina | \$5.00 May Be | |
| 23 | • | 28 | | Trust Fund Contribution | | Added to Fees | | |
| Ζ ιρ | Country Zip | | Country | | 8. This corporation has liab | | | |
| 24 | 25 | 29 | 30 | , | Florida Statutes | Yes | | |
| 9, Name and Address of Current Registered Agent | | | 1001 | | 10. Name and Address of New Registered Agent | | | |
| TARRADEEL, EUSEBIO F | | | | | 81 Name | | | |
| 4840 NW 184TH TERRACE | | | | | | | | |
| | AI FL 33055 | | 82 Street Addre | | Address (P.O. Box Number is Not A | (cceptable) | | |
| MIAMI FE 33033 | | | | 1 | | *************************************** | | |
| | | | | | | · | Tagl #r. O. I | |
| | | | | City | | FI | 85 Zip Code | |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508. Florida Statut | tes, the abov | re-named o | corporation submits this statement | for the nurnose | of changing its registered | |
| 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 familian with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE | Stgriative typical or printed name of regarded as | unit and too if anidotable INO | IF Registered Ac | ent signature r | regulred when reinstating) | DATE | | |
| 12. | | ND DIRECTORS | 13. | jon ang raid o | ADDITIONS/CHANGES T | | JD DIRECTORS IN 12 | |
| TITLE | PD | DELETE | 1.1 TITLE | | | | Change Addition | |
| NAME | BORGES, ALINA | | 1.2 NAME | | | | | |
| STREET ADDIRESS | AREA NAM OO AVE | | 1.3 STREE | T ADDRESS | | | | |
| CITY-ST ZIF | DIALEAU CARRENC EL 22012 | | 1.4 CiTy - | | | 4.45 | | |
| TITLE | VD | ☐ DELETE | 2.1 TITLE | | | · · · · · · · · · · · · · · · · · · · | Change Addition | |
| NAME | tapanes, armando jr. | | 22 NAME | | | | | |
| STREET ADDRESS | AREA BLIM ON AVE | | 23 STREE | T ADDRESS | | | | |
| CITY - ST - Zif | INALEAL CAPPEND EL COCAO | | 2 4 City | | | | i | |
| 11TLF | | | 3 1 TITLE | 31-211 | | | Change Addition | |
| NAME | ALVANCY DAPACE I | | 32 NAME | | | | - , - | |
| STREET ADDRESS | AREA MIN OF THE | | | T ADDRESS | | | | |
| CITY-SI-70 | LIMITAL CAPOTAIC EL 00040 | | | 34. CITY-ST-ZIP | | | | |
| THUF | | | 41 TITLE | UT AP | | | Change Addition | |
| NAME | 000000 10000 4 | | 4.2 NAM | . | | | | |
| STREET ADDRESS | AAREA NIME OO AME | | | T ADDRESS | | | | |
| CHY+S1+ZIP | ANALEAN CARRENCEL COOLS | | 4.4 CITY- | | | | | |
| 101.6 | | DELETE | 5.1 TITLE | | The second secon | | Change Addition | |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | | |
| CITY ST-70P | | | 5.4 City- | | | | | |
| TILE | | | 6.1 TITLE | | | | Change Addition | |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| C TY - ST - ZiP | | | 6.4 CITY- | • | | | | |
| 14. I do here: | oy cert ly that the information suppli | ed with this filing does not qual | | | ated in Section 119.07(3)(i), Florida | a Statutes. I furth | ner certify that the | |
| informatic Lam an o | by certily that the information supplied indicated on this annual report or flicer or a rectal of the corporation of | supplemental annual report is or the receiver or truspe empore | true and acc wered to exe | curate and cute this re | that my signature shall have the se eport as required by Chapter 607. | arfie legal effect Fjorida Statutes; | as if made under oath; that and that my name | |