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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F30123

(6)

DAVID TRANSPORT, INC.

Apr 17 1998 8:00am
Secretary of State
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	<u> </u>		

	animal Olan	e of Business	Mailing Address						
			S .						
3562 NW 78TH ST MIAMI FL 33147-4529 US			3562 NW 79TH ST Miami Fl 33147-4529 US				DO NOT WRITE IN THIS SPACE		
,			00				3. Date Incorporated or Qualified 05/12/1981		
2. Principal Place of Business 2a. Mailing Address 26						4. FEI Number Applied For S9-2096335 Not Applied be			
	Suite, Apt.	#. etc.	Suite, Apt. #, etc.				60.76		
22			27	├ ─┐			5. Certificate of Status Desired Fee Required		
City & State		8	City & State				B. Election Campaign Financing \$5.00 May Be		
23	·		28				Trust Fund Contribution Added to Fees		
==-1	Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the current year Intangible		
24		25	29	30			Personal Property Tax due June 30. Yes No		
		9. Name and Address of	Current Registered Agent				10. Name and Address of New Registered Agent		
	AG	IUIAR, ANGEL D			81	Name			
		01 E 8TH CT			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
		ALEAH FL 33010			"	Shoot Add	iless (1.0. box Hollider is Hot Nocopiable)		
				Ţ	83				
				-	-	0.4.	les 7io Codo		
				l	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.									
SI	GNATURE	Signature, lyped or printed name of regi	stored agent and leth if applicable (NOTE	Registered	Ager	1) signalure requi	ireo when reinstating) DATE		
12	•	OFFICE.	RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TIT	LE	PTD	☐ DELETE	1.1 TITLE			Change Addition		
NAI	VIE	A GUIAR, ANGEL D		1.2 NAM					
STE	EET ADDRESS	1501 E 8TH CT		1.3 STI	REET A	address			
ÇIT	Y-ST-ZIP	HIALEAH FL		1.4 CITY		-ZIP			
TIT	LE	VSD	☐ DELETE	2.1 TITL			Change Addition		
NAI	VIE	TADDRESS 1501 E 8TH CT 23 S		2.2 NA	2.2 NAME 2.3 STREET ADDRESS				
STF	EET ADDRESS			2.3 \$19			·		
CIT	Y-ST-ZIP	HIALEAH FL		2 4 001		1 · ZIP			
TIT	LE		L DELETE	3 1 TIT	LE		Change Addition		
NA	ME			3 2 NA	ME				
STE	EET ADDRESS 33 S		3.3 ST	REET A	ADDRESS				
CIT	Y-ST-ZIP			3 4. CII		- 2 IP			
TIT	LE		☐ DELETE 4		LE		Change Addition		
NAI	ME			4 2 N/	AME				
STF	EET ADDRESS			4.3 STREE		ADDRESS			
CIT	Y-ST-ZIP			44 CITY-		- ZIP			
TIT	LE		☐ DELETE	5 1 TITLE			L Change L Addition		
NA	ME]			5.2 NA	ME				
STF	REET ADDRESS			5.3 ST	REET A	ADDRESS			
CIT	Y-ST-ZIP			5.4 CII	IY-SI	- ZIP			
TIT	LE		DELETE	6.1 TIT	LE		Change Addition		
NAI	MÉ .			6.2 NA	ME	1			
STF	REET ADDRESS	•		6.3 ST	REET A	ADDRESS			
	Y-ST-ZIP	,		6.4 CIT	TY-ST	-ZIP	· · · · · · · · · · · · · · · · · · ·		

14. 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 a prochiment with an address.