Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90233 033 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400000385

Corporation Name

NATIONAL RETAIL TRANSPORTATION INC

MATIONA	E HETAIL MANOPONTATIO	14, 1140.			
Principal Place of Business Mailing Address					T (001/40 tille tell) allest antit altit aditt unitt antit antit allest litter i stat fall
333 MEADOWLAND PARKWAY 333 MEADOWLAND PARK SECAUCUS NJ 07094 SECAUCUS NJ 07094			Υ		
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 01/25/1994
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			22-2250997 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible Personal Property Tax.
24	25		30		Personal Property Tax.
	9. Name and Address of Current	Registered Agent	81	Name	IV. Mailly and Addition of North Augustian
CT	CORPORATION SYSTEM				
1200 SOUTH PINE ISLAND ROAD			82	Street Ad	address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33324			83		
				0.7	85 Zip Code
			84	City	FL 63 Zip code
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut	nonzed by	the corpora	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
SIGNATURE		ALOTE F			outrad when reinstation) DATE
12.	Signature, typed or printed name of registered agent		13.	n signature req	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PC	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WALSH, NORBERT J		1.2 NAME		·
STREET ADDRESS	333 MEADOWLAND PARKWAY		1.3 STREET	ADDRESS	ĺ
CITY-ST-ZIP	SECAUCUS NJ 07094		1.4 CITY-S	T-ZIP	
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	WISNIEWSKI, RAYMOND		2.2 NAME		
STREET ADDRESS	2820 16TH STREET		2.3 STREET	ADDRESS	
CITY-ST-ZIP	NORTH BERGEN NJ 07047		2. 4 CITY-S	T-ZIP	
TITLE			3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP			3.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		-
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	FADDRESS	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		j
STREET ADDRESS			6.3 STREE	TADDRESS	

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 trastee 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP