FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996

Secretary of State DIVISION OF CORPORATIONS

DOCUM 1. Corporation N	IENT # F9400 DELIVERY SERVICE, INCO	0002055 (1) DRPORATED						.
Principal Place o	of Business	Mailing Address						
P.O. BOX 736	ផ	P.O. BOX 7361						
MOBILE AL 3	6670	MOBILE AL 36670			3. Date incorporated or Qualified	3a. Date	of Last Rep	port
					04/20/1994	0-	4/11/199)5
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number			pplied For
21	10.00	26			63-0388538			ot Applicable Additional
Suite, Apt. #,	etc.	Suite, Apt. #, etc.	1		5. Certificate of Status Desired			equired
City & State		City & State			6. Election Campaign Financing	F-3	\$5.00	May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country	Zφ	Country		8. This corporation has liability fo	intangible ta: s X Í No	cunders 1	199.032,
24	25		30		10. Name and Address of New		laent	
	9. Name and Address of Currer	nt Registered Agent	81	Name	10. Name and Address of New	riogistorou :	.92	
0401/ 1	MARTINI IO		82	Da A A dal	ress (P.O. Box Number is Not Accepta	(blo)		
SACK, MARTIN JR 2064 PARK ST.				Street Addi	ress (m.c., blox indiriber is not Accepte			
	83							
JACKSC	ONVILLE FL 32204		84	City			85 Zip	Code
				•		FL	<u> </u>	
CICNIATURE	Signature, typed or printed name of registered ages				ration submits this statement for the pard of directors. I hereby accept the apartment in the partment of the partment in the	EMATE		
TITLE	PV	DELETE	1, 1 TITLE				Change	Addition
NAME	YOUNG, ROBERT W		1.2 NAME					
STREET ADORESS	2625 SNOW RD.		13 STREET	ADDRESS				
CITY-SI-ZIP	SEMMES AL 36575		1.4 CITY - S	it - 7iP	<u></u>	···	Change	☐ Addition
TITLE	\$	DELETE	2 1 TITLE			L	_ ontonge	L) Addition
NAME	YOUNG, RICHARD C		2.2 NAME 2.3 STREE	ALUBER C				
STREET ADDRESS	2455 SNOW RD SEMMES AL 36575		2 4 City - 5	1				
CITY - ST - ZIP TITLE	SEMMES AL 30373	[] DELETE	3 1 Talle]	Change	☐ Addition
NAME		, some e	3.2 NAME					
STREET ADDRESS			3.3. STREE	T ADDRESS				
CITY-ST-ZIP			3.4 CITY -	SE ZOP			70-	<u> </u>
TITLE		☐ DELETE	4 1 TITLE			Į.	Unange	Addition
NAME			4.2 NAME					
STREE1 ADDRESS				1 ADDRESS				
CITY-ST-ZIF		DELETE	5 1 TITLE	5' - ZiP			Change	Addition
TITLE		[] bettie	5.2 NAME			•		_
NAME				LADORESS				
STREET ADDRESS			5.4,01 <u>1Y</u> -	I				-
CITY-ST-ZIP TITLE		[] DELETE	6 1 T ILF				Change	Addition
NAME			6.2 NAME					
CIDELL VUUDING			63STPEE	1 ADDRESS				

14. If 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 early, 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.

6.4 CITY: ST-ZIP

SIGNATURE:

STREET ADDRESS

While And Typed on Printed Name of Signing Officer on Director

Richard C. Young