Mailing Address 1304 SW 160TH AVE

FT LAUDERDALE FL 33326

Suite, Apt. #, etc.

Suite #102

Ft. Laurderdale

2a. Mailing Address

City & State

STF 117

26

27

28

**PROFIT** CORPORATION ANNUAL REPORT

1999

A & F TRANSPORTATION CO.

1545 north park dr.

Name and Address

1200 SOUTH PINE ISLAND ROAD

**C T CORPORATION SYSTEM** 

PLANTATION FL 33324

1. Corporation Name

Principal Place of Business

16614 SADDLE CLUB RD

FT LAUDER()ALE FL 33326

Suite, Apt. #, etc.

City & State

22

23

24

2. Principal Place of Business

Suite #102

Ft.Lauderdale



DOCUMENT # F9600001006

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1545 North Park DR.

## Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90020 035 \*\*\*150.00

DO NOT WRITE IN	THIS SPACE
Date Incorporated or Qualifed	
02/27/1996	
FEI Number	Applied For
93-0707655	Not Applicable
Certificate of Status Desired	\$8.75 Additional Fee Recuired
Election Campaign Financing	\$5.00 May Be

Added to Fees

8. This corporation owes the current year intangible []No Personal Property Tax. A | |29| 33326 of Current Registered Agent 29 USA 10. Name and Address of New Registered Agent 81 Name Street Acdress (P.O. Box Number is Not Acceptable) 83 Zip Code 85 84 City

6. Election Campaign Financing Trust Fund Contribution

3.

office cr	to the <u>provisions of Sections 607.0502</u> registered agent, or both, in the State of am familiar with, and accept the obligation	Florida. Such change was aut	thorized by the corpora	progration submits this statement for the tion's board of cirectors. Thereby accept	purpose of changing its of the appointment as reg	stered
SIGNATURE	Signature, typed or printed name of registered agent	and title if nonlicable (NOT): f	Registered Agent signature reg	red when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	S IN 12
TITLE  NAME  STREET ADDRESS	PSC ANNETT, CHARLES R	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	1545 North Park Suite #102	Dr. Change	Addition
CITY-ST-ZIP	FT LAUDERDALE FL 33326		1.4 CITY-ST-ZIP	Ft. Lauderdale,	33 3 26	
TITLE	T	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME STREET ADDRE 35			2.2 NAME 2.3 STREET ADDRESS	1545 North Park Ft. Lauderdale,	#102	
CITY-ST-ZIP TITLE NAME	V ANNETT, LETICIA M	☐ DELETE	2. 4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME	1545 North Park Suite#102	Change	Addition
STREET ADDRESS CITY-ST-ZIP	40044 04001 C 01110 00		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	Ft. Lauderdale,	FL 33326	
TITLE NAME STREET ADDRESS		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change	☐ Addition
TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 City-St-ZIP			
TITLE NAME		☐ DELETE	6.1 TITLE 6.2 NAME		Change	Addition
STREET ADDRESS			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			

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 comporation 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

SIGNATURE: