

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

FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000006192 (6)

1. Corporation Name

OZINGA TRANSPORTATION SYSTEMS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
21900 S. CENTRAL AVENUE
MATTESON IL 60443

Mailing Address
21900 S. CENTRAL AVENUE
MATTESON IL 60443

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

3. Date Incorporated or Qualified

11/26/1996

4. FEI Number

36-3506930

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes

No

9. Name and Address of Current Registered Agent

PARKER, GEORGE
10091 SW 158 TERRACE
MIAMI FL 33157-1644

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

DC
NAME
OZINGA, MARTIN III
STREET ADDRESS
21900 S. CENTRAL AVENUE
CITY-ST-ZIP
MATTESON IL 60443

TITLE ☐ DELETE

P
NAME
JOUSMA, RICHARD
STREET ADDRESS
21900 S. CENTRAL AVENUE
CITY-ST-ZIP
MATTESON IL 60443

TITLE ☐ DELETE

SD
NAME
OZINGA, RICHARD K
STREET ADDRESS
21900 S. CENTRAL AVENUE
CITY-ST-ZIP
MATTESON IL 60443

TITLE ☐ DELETE

T
NAME
VAN DYK, DONALD L
STREET ADDRESS
21900 S. CENTRAL AVENUE
CITY-ST-ZIP
MATTESON IL 60443

TITLE ☐ DELETE

O
NAME
OZINGA, JAMES A
STREET ADDRESS
21900 S. CENTRAL AVENUE
CITY-ST-ZIP
MATTESON IL 60443

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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 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.

SIGNATURE:

Donald L Van Dyk

2/16/98

708-720-6000

CR2E034 (10/97)