PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700000338

1. Corporation Name

ZEUS TRUCK BROKERS, INC.

Principal Place of Business

Mailing Address

708 S. HIGHWAY 17-92 LONGWOOD FL 32750

708 S. HIGHWAY 17-92 LONGWOOD FL 32750

May 06, 1999 8:00 am Secretary of State

05-06-1999 90111 028 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

01/21/1997

2. Principal P	lace of Business 2a. Mailing Address		_	4. FEI Number	Applied For
	S. FAENCH AVE. 26 1300 5	f. stal	h Are	_ 03-0354112	Not Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc.	1 7	<u> </u>	_	\$8.75 Additional
	x RA 80x 8	A		5. Certificate of Status Desired	Fee Required
City & Stat	e City & State			6. Election Campaign Financing	\$5.00 May Be
23 JAA	IFORD FL 28 SANFORE	, ۴ L		Trust Fund Contribution	Added to Fees
Zip	/ Country Zip	Countr	y	8. This corporation owes the current year Intar	
24 327	71 25 29 3271	30		Personal Property Tax.	ີ Yes 💢 No
	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered A	jent
		8	I Name		
WELCH, EVELYN			Street Addr	ress (P.O. Box Number is Not Acceptable)	
708 S. HIGHWAY 17-92			82 Street Address (P.O. Box Number is Not Acceptable)		
LONGWOOD FL 32750			3		
		<u>_</u>			DE Zin Codo
		8-	City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statut-	es, the abo	/e-named corp	poration submits this statement for the purpose of cl	nanging its registered
office or r	egistered agent, or both, in the State of Florida, Such change was a	uthorized b	, the corporation	on's board of directors. I hereby accept the appoint	nent as registered
agent. I a	m familiar with, and accept the obligations of, Section 607.0505, Flo	rida Statute	S.		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE	· Registered Ag	ent signature require	ad when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	<u></u>	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PCTS DELETE	1.1 TITLE			Change Additi
NAME	GROYSAN, WILLIAM	1.2 NAME			
STREET ADDRESS	C/O VAN-PAK, 255 CADWELL DRIVE		T ADDRESS		
	SPRINGFIELD MA 01104	1.4 C/TY-	- 1		
CITY-ST-ZIP	DELETE	2.1 TITLE		fo	☐ Change ∑ Addit
		2.2 NAME	`	FO	•
NAME			TADDRESS .	John Morechi	_
STREET ADDRESS			T ADDRESS L	TO YAN-PAR, 244 CADWE	1) Dr
CITY-ST-ZIP	☐ DELETE	2. 4 CITY-	SI-ZIP	John Parechy To YAN-PAR, 244 CADWE Pringfield, MA 011021	☐ Change ☐ Additi
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NAME					
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NAME		4. 2 NAM			
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP		4.4 CITY-	ST-ZIP		Channa Cara
TITLE	DELETE	5.1 TITLE	1		☐ Change ☐ Addit
NAME		5.2 NAME			
STREET ADDRESS		5.3 STRE	ET ADDRESS		
CITY-ST-ZIP		5.4 CITY-	or 710		
		6.1 TITLE	\$1-219		☐ Change ☐ Addit

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP