

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90332 042 ***150.00

DOCUMENT # F99000004790

1. Entity Name
CARIBBEAN TRANSPORTATION SERVICES, INC.



Principal Place of Business
**7304 WEST MARKET STREET
GREENSBORO, NC 27409**

Mailing Address
**7304 WEST MARKET STREET
GREENSBORO, NC 27409**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

942 S. Shady Grove Road

Suite, Apt. #, etc.

c/o Robert T. Molinet

City & State

Memphis, TN 38120

Zip

38120

Country

USA

03252004

Chg-P

CR2E034 (10/03)

4. FEI Number

62-1789751

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PCEO
FAIETA, RICHARD A
7304 WEST MARKET STREET
GREENSBORO, NC 27409** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
IRWIN, DAVID B
7304 WEST MARKET STREET
GREENSBORO, NC 27409** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
TURMAN, LYNN H
7304 WEST MARKET STREET
GREENSBORO, NC 27409** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
CLARK, EDMOND
6075 POPLAR SUITE 400
MOUNT OLIVE, MS 39119** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
G. Edmond Clark
6075 Poplar Avenue
Memphis, TN 38119** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Assistant Secretary
C. Edward Klank III
942 S. Shady Grove Road
Memphis, TN 38120** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Assistant Treasurer
Hugh A. Skinner
942 S. Shady Grove Road
Memphis, TN 38120** ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

C. Edward Klank III **C. Edward Klank III**

4-7-04

Date

901-818-7425

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR