FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **G71096** **(3)**

1. Corporation Name
MCNEILL TRANSPORT, INC.

Principal Place of Business	Mailing Address
XXXXXXXXXXXXXXX 325 S.W. 66TH AVE XXXXXXXXXXXXXXX MARGATE, FL 33068	XXXXXXXXXXXXXXX 325 S.W. 66TH. AVE. XXXXXXXXXXXXXXX MARGATE, FL. 33068

3. Date Incorporated or Qualified: 11/21/1983
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21: 325 S.W. 66TH. AVE.
Suite, Apt. #, etc.
22:
City & State
23: MARGATE, FL.
Zip
24: 33068
Country
25: BROWARD

2a. Mailing Address
26: 325 S.W. 66TH. AVE.
Suite, Apt. #, etc.
27:
City & State
28: MARGATE, FL.
Zip
29: 33068
Country
30: BROWARD

4. FEI Number: 59-2363730 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

XXXXXXXXXXXXXXX
XXXXXXXXXXXXXXX
XXXXXXXXXXXXXXX
XXXXXXXXXXXXXXX
RESIGNED 4/1/97
ROBERT E. McNEILL
325 S.W. 66TH. AVE.
MARGATE, FL. 33068

10. Name and Address of New Registered Agent

81 Name: ROBERT E. McNEILL
82 Street Address (P.O. Box Number is Not Acceptable): 325 S.W. 66TH. AVENUE.
83:
84 City: MARGATE, FL. FL 85 Zip Code: 33068

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: ROBERT E. McNEILL — Signature, typed or printed name of registered agent and title if applicable
ROBERT E. McNEILL — (NOTE: Registered Agent signature required when reinstating)
President 4-29-97 — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	MCNEILL, ROBERT E		1.2 NAME		
STREET ADDRESS	325 SW 66TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE, FL 00000		1.4 CITY-ST-ZIP		
TITLE	DST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MCNEILL, JANET		2.2 NAME		
STREET ADDRESS	325 SW 66TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE, FL 00000		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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: ROBERT E. McNEILL President ROBERT E. McNEILL 4-29-97 (954) 974-4711