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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

G85119

(7)

AAA ALL SERVICE TRANSPORTATION, INC.					A LEGALNI DOGI COLDI GILIKI MADI MADI MADI	lil Ofbii Olêli Di	All Belle Bran	1 DIŘIE 2005
Principal Place of Business Mailing Address					- 1 INDIELL KONT FOLDT ØLIBE DIONT STORE I			I 0 \$11 IUB1
2323 HARBOR BLVD.		2323 HARBOR BLVD.						
P. O. BOX 3675 PORT CHARLOTTE FL 33952		P. O. BOX 3675		DO NOT WRITE	E IN THIS SE	PACE		
US		PORT CHARLOTTE FL 33952 US		3. Date Incorporated or Qualified	- 114 17 110 01	7,01.		
		••			02/16/1984			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		TÄL	plied For	
21		26		59-2486789		<u> </u>	ot Applicable	
		Suite, Apl. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75	Additional
22		27			6. Certificate of Status Desired		Fee Re	equired
City & State		City & State		6. Election Campaign Financing	_	\$5.00	May Be	
23		28		Trust Fund Contribution		Added		
Zip	Country	Zip []]	Country	<i>†</i>	8. This corporation owes or has p	-		1
24	25 9. Name and Address of Currer	29 nt Registered Agent	30		Personal Property Tax due Juni 10. Name and Address of New Re			J No
\Ani		81	Namo	IV. Hame and Address of New III	paratore A	No.		
WILLIAM H. COWBURN 2323 HARBOR BLVD								
	RT CHARLOTTE FL 33952		82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)		ļ
PO	NI ONANEOTTE PE 33832		83					
				<u> </u>				
			84	City		FL	85 Zip i	Code
office or re agent. I as SIGNATURE	to the provisions of Sections 601.2006 egistered agent, or both, in the State of familiar with, and accept the oblig Stgnaure, tyled or printed name of registered age	ef Horida Such change was pations of, Section 607.0505, F	authorized by forida Statute	y the corporat s.	oration submits this statement for the ion's board of directors. I heroby acce ed whor (enstaing)	purpose of copt the appoint	nanging it ntment as	s registered registered
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PT	[]] DELETE	1 1 TALE			l	Change	L_] Addition
NAME	WILLIAM H. COWBURN		1.2 NAME					
STREET ADDRESS			1.3 STREET	ADDRESS				-
CITY-ST-ZIP	PORT CHARLOTTE FL	DILETE	1.4 CITY - S	5T-ZIP			Chann	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE	VPS	□ Dittele	2.1 TIBLE			L	Change	Addition
NAME .	PATRICIA COWBURN 2323 HARBOR BLVD		2.2 NAMF	Abserse				
STREET ADORESS	PORT CHARLOTTE FL			ADDRESS	•			
CITY-ST-ZIP TITLE	TOM CHARLOTTE IL	DELETE	2 4 C(1) Y 3.1 TITLE	51-ZIP			Change	Addition
NAME		_	3 2 NAME			_		
STREET ADDRESS			3.3 \$1REET	ADDRESS				
CITY-ST-ZIP	3.4		3.4. CiTY-1					
TITLE		DELETE	4.1 TOTLE				Change	Addition
NAME	4.2		4. 2 NAME]				j
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY+ST-ZIP			4 4 CITY - S	51 - ZiP				
TITLE		DELETE	5 1 TITLE		·	Ī	Change	Addition
NAME			52 NAME					
STREET ADDRESS			53 STREET	ADDRESS				1
CITY+ST-ZIP			5.4 CITY- \$	I - 7IP				
TITLE		L_I DELETE	6.1 TITLE			L	Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-S1-ZIP	add that the life of the life	34 4 1 4 5 5 5 5 5 5 7 7 7 7	6.4 CITY - S		C-15- 440 07/0VD 51 11 01 11	2 4	4 . 45 . 5 . 6	
14. Thereby 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 eath; 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.								

IGNATURE: William A (motores) 4-15-98 (941)62

FILED
Apr 21 1998 8:00am
Secretary of State