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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Feb 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H55845

(2)

TRIANGLE TRANSPORT SYSTEMS, INC.

Principal Place of Business Mailing Address							IST Band t beet bidil	I BABIT OFBIF BION OF	1011 0101F 100F	
13605 S. DIXIE HIGHWAY MIAMI FL 33176 US		C/O BERENFELD ET AL 7700 N. KENDALL DR #805 MIAMI FL 33158-7597	7700 N. KENDALL DR #805							
						 Date Incorporated or C 05/06/1985 	Qualified 3	3a. Date of Las 09/16/1990	•	*****
2. Principa' Pi 21	face of Business	2a. Mailing Address				4. FEI Number 65-0200982			Applied For Not Applicabl	le
Suite, Apt.	#, etc.	Suite Apt. #, etc.			······································	5. Certificate of Status De	esired [5 Additional Required	
City & State	e	City & State	······································			Election Campaign Fin Trust Fund Contribution	~ —		00 May Be	_
Zip	Country	Zip	Coun	try		8. This corporation has lie				
24	25					Florida Statutes Yes No 10, Name and Address of New Registered Agent				
000	9. Name and Address of Curre	nt registered Agent		BIT	Name	10, Name and Address o	I New Heggs	ered Agent		
	ioenwetter, abner 05 S. dixie highway		Ľ						<u>, </u>	
	MI FL 33176			B2	Street Ac	ddress (P.O. Box Number is Not	Acceptable)			
••••			8	В3			**************************************			_
			1	84	City			85 Z	p Code	\dashv
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statute	s, the abo	ove-	named c	orporation submits this statemen	at for the purp	ose of changin	a its registerer	d
office or r	egistered agent, or both, in the State m familiar with, and accept the oblic	e of Florida. Such change was au	uthorized	bν	the corpo	pration's board of directors. I here	eby accept th	e appointment	as registered	
SIGNATURE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
	Segment, type a or production or of registered ag	· · · · · · · · · · · · · · · · · · ·		Agen	it signature re	equired when reinstating)		DATE		_
12.	P\$T	ND DIRECTORS DELETE	13.	F	1	ADDITIONS/CHANGES	TO OFFICER	S AND DIRECTO		<u>.</u>
NAME	SCHOENWETTER, ABNER	Land Occord	1.2 NAN						,c	117
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STREET ADDRESS					ADDRESS .					
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NAME			6.2 NAN	ΜE						
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informatio Lam an o	by certify that the information supplic or indicated on this annual report or flicer or director of the corporation on In Block 12 or Block 13 if changed, o	supplemental annual report is true or the receiver or trustee empower	ue and ad ered to ex	CCLH	rate and ti	hat my signature shall have the	same legal eff	fect as if made utes; and that m	under oath: th	