FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **J42856** **(1)**

1. Corporation Name

TRANSPORTATION RESCUE CONSULTANTS, INC.

Principal Place of Business

3702 MEADOWBROOK AVENUE
ORLANDO FL 32808

Mailing Address

3702 MEADOWBROOK AVENUE
ORLANDO FL 32808

3. Date Incorporated or Qualified: **11/19/1986**

3a. Date of Last Report: **04/25/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

4. FEI Number: **59-2734168** ☐ 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

KIDD, JOEL STEVEN
1927 LOST PINE LN
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section(s) 607.0505 and 617.1505, 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 DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

DPT
KIDD, JOEL STEVEN
1927 LOST PINE LN
APOPKA FL
☐ DELETE

VSD
CZAJKOWSKI, JOHN DAVID
3702 MEADOWBROOK AVENUE
ORLANDO FL
☐ DELETE

☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP
☐ Change ☐ Addition

(Repeated for 21, 41, 51, 61)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 attached sheet, with an address.

SIGNATURE: John D. Czajkowski JOHN D. CZAJKOWSKI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96 DATE 407-298-1720 TELEPHONE #

CR2E034 (12/95)