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 #

J62540

(6)

VAN TRENT TRUCKING CORPORATION

FILED

Apr 17 1998 8:00am

Secretary of State

Fillicipal Flace U	DUSHIBSS	Mailing Address	1				
4720 SUGAR CE MELBOURNE FL US		4720 SUGAR C MELBOURNE F US		DO NOT WRITE IN THIS	SPACE		
				3. Date Incorporated or Qualified 03/18/1987			
2. Principal Place	of Business	2a. Mailing Addr	ess	4. FEI Number	Applied For		
21		26		59-2797676	Not Applicable		
Suite, Apt. #, 6	etc.	Suite, Apt. #,	elc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the outpersonal Property Tax due June 30.	irrent year Intangible Yes No		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VAN 1	ZANT PONALO D		81 Name				

4720 SUGAR CREEK DRIVE MELBOURNE FL 32904

	j			<u> </u>
	84	City	85	Zip Code
	ľ	- " Fl		
he at	οονε	 -named corporation submits this statement for the purpose of c 	han	ging its registered
vei zen	d by	the corneration's board of directors. I berefy accept the appear	ntm	ont ac registered

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

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agent, or both, in the State of Florida. Such change was authoriz
agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida St

SIGNATURE	Signature, typed or printed name of registered agent and title if ap	plicable (NO1)	: Registered Agent signature requir	ed when reinstating)	DATE	
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	
TITLE	_ P	DELETE	1.1 TITLE		Change	Addition
NAME	TRENT, JULIA H.		1.2 NAME			
STREET ADDRESS	4720 SUGAR CREEK DRIVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32904		1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			33 STREET ADDRESS			
DITY-ST-ZIP			3.4. CITY-SY-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			

14. 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 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.