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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

BAM PARCEL SERVICE, INC.

TAN TATOLE OLIVIOL, INC	•	
Principal Place of Business	Mailing Address	
% ROBIN HOLZKNECHT 10303 SW 128TH PLACE MIAMI FL 33186	% ROBIN HOLZKNECHT 10303 SW 128TH PLACE MIAMI FL 33186	
Principal Place of Business 1	2a. Mailing Address 26	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>01/25/1989</u> 4. FEI Number Applied For Not Applicable 59-2931135 \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Zip Ζip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. X Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOLZKNECHT, ROBIN 10303 SW 128TH PLACE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186 83 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition DST HOLZKNECHT, ROBIN 1.2 NAME NAME 10303 SW 128TH PLACE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 2.1 TITLE HOLZKNECHT, MARK 2.2 NAME NAME 10303 SW 128TH PLACE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP Addition DELETE Change 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TiTL F 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP