

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 # K79151

(2)

1. Corporation Name

T M TRUCKING & LEASING, INC.



Principal Place of Business

% THEODORE F. VINECKI  
240 PARK STREET NORTH  
ST PETERSBURG FL 33710

Mailing Address

% THEODORE F. VINECKI  
240 PARK STREET NORTH  
ST PETERSBURG FL 33710

3. Date Incorporated or Qualified  
04/05/1989

3a. Date of Last Report  
08/08/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number

59-2944957

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

VINECKI, THEODORE F.  
240 PARK STREET NORTH  
ST. PETERSBURG FL 33710

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 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

Signature typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature is required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE D VINECKI, THEODORE F. DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
240 PARK STREET NORTH  
ST. PETERSBURG FL

TITLE D VINECKI, MARGARET M. DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
240 PARK STREET NORTH  
ST. PETERSBURG FL

TITLE DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE Change Addition

12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

2. 1 TITLE Change Addition

22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

3. 1 TITLE Change Addition

32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

4. 1 TITLE Change Addition

42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

5. 1 TITLE Change Addition

52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

6. 1 TITLE Change Addition

62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

14. I do 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)(k), 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.

SIGNATURE: Margaret Vinecki - Vice Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-96 813-343-4436

DATE

Daytime Phone #

CR2E034 (12/95)