FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L10671

ROBERSON TRUCKING COMPANY, INC.

(0)

FILED Apr 21 1997 8:00am Secretary of State



| 2155 NW 6 | ace of Business CT DALE FL 33311 | Mailing Address 2155 NW 6 CT FT LAUDERDALE FL 333 | 5 | | | | | | |
|-----------------------|--|---|-------------------|---------|-------------|---|---|------------------------------------|------------------------|
| | | | | | | 3. Date Incorporated or Qualifie 08/21/1989 | o 3a. Da 02/ | 3a. Date of Last Report 02/19/1996 | |
| 2. Principal | l Place of Business | 2a. Mailing Address | | | | 4. FEI Number 65-0140134 | Applied For Not Applicable | | |
| 22 | ot #, etc | Suite, Apt. #, etc | | | | 5. Certificate of Status Desired | | | Additional Required |
| City & St 23 | | City & State | 28 | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | |
| Z(p) | Country Zip 25 29 9. Name and Address of Current Registered Agent | | | ntry | | 8. This corporation has liability for intengible tax under s. 199 032, Florida Statutes Yes No. 10. Name and Address of New Registered Agent | | | |
| | | ent Hegistered Agent | | 81 | Name | 10. Name and Address of New | registered . | agent | |
| | OBERSON, ERIC L. | | | " | Name | | | | |
| | 155 NW 6 CT T LAUDERDALE FL 33311 | | | | Street Addr | idress (P.O. Box Number is Not Acceptable) | | | |
| ļ | | | | 83 | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code |
| SIGNATUR | Standard, typied or printed name of registered a OF FICE RS A | | | | | ed when reinstahing) ADDITIONS/CHANGES TO OF | DATE | | |
| TITLE | PSD | DELETE | 1.1 107 | LE | | | | Change | Addition |
| NAME | ROBERSON, ERIC L. | | 1.2 NA | ME | | | | | |
| STREET ADDRESS | 3 2155 NW 6 CT | | 1,3 ST | REET A | ADDRESS | | | | |
| Crity - St - ZiP | FT LAUDERDALE FL | | 1.4 017 | Y-ST | - ZIP | | | | |
| TILE | | [_] DELETE | 2 1 717 | | | | | ☐ Change | Addition |
| NAME | | | 2.2 NA | | | | | | |
| STREET ADDRES | 55 | | | | ADDRESS | | | | |
| CITY ST-7P | | DELETE | 2 4 Ct | | I-ZIP | | *************************************** | Change | Addition |
| NAMÉ | | par | 3.2 NA | | - | | | | |
| STREET ADDRES | ss | | | | ADDRESS | | | | |
| CHY-ST ZIP | | | 3.4 CI | TY - S1 | T- 7IP | | | | |
| TILLE | | ☐ DELETE | 4.1 TII | (LE | | | | Change | Addition |
| NAME | | | 4. 2 N/ | | | | | | |
| STREET ADDRES | SS | | - 1 | | ADDRESS | | | | |
| City-ST ZIP | | DELETE | 4.4 CF | | · ZiP | ······································ | | Change | Addition |
| TITLE NERG | | E-1 OCCULE | 5.1 T// 5.2 NA | | ĺ | | | Pm Audulic | |
| NAME STREET ADDRES | cc | | | | ADDRESS | | | | |
| CITY - \$1 - ZIF | 100 | | 5.4 CF | | | | | | |
| HILE | | DELETE | 6.4 CI | | - K-11 | | | Change | Addition |
| NAME | | | 62 NA | | | | | | , |
| STREET ADDRES | ss , | | 63 ST | AEET A | address | | | | |
| CHY ST-78 | | | 6400 | TY-\$1 | - ZIP | | | | |

14. I do 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 this 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 its changed or on an attaching with an address.

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

4-14-97

0269178

.