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PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1, Corporation Name

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED	
Feb 12 1998 8:00ar	n
Secretary of State	

	MENT # L12809 OR FREIGHT FORWARDING, ((4) INC.				18
Principal Plac	e of Business	Mailing Address			- I IBBIIBII Ba i iibin iihal ibiii gaira ikit Alak bi	BUL BUBUL BUBUL BUBUK DIRKU IBBU
B15 S MAIN	6T	815 S MAIN ST				
5 FLR	5 FLR 6 FLOOR			DO NOT WRITE IN THI	C CDAOE	
JACKSONVILI US	LE FL 3220/	JACKSONVILLE FL 32207 US			3. Date Incorporated or Qualified	3 SPACE
33		••			08/29/1989	
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			59-3004326	Not Applicable
Suite, Apt.	#, otc	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22	27				5. Certificate of status beared	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country		Trust Fund Contribution	Added to Fees
24	25	29	30		8. This corporation owes or has paid the of Personal Property Tax due June 30.	current year internal pible
	g. Name and Address of Current		100		10. Name and Address of New Registere	11
PR	ICE, R. J.		81	Name		
	5 S MAIN ST		82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
JAI	CKSONVILLE FL 32254			01100171001		
			63			
			84	City		85 Zip Code
					<u> </u>	L · ·
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05:02 egistored agent, or both, in the State of m familiar with, and accept the obligab	and 607.1508, Florida Statut f Florida, Such change was a ons of, Section 607.0505, Fk	es, the above authorized by orida Statutes	e-narned corp the corporat s.	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE						····
12.	Signature, typed or printed name of registers d aspect OFFICERS AND		13.	nt signature requir	ADDITIONS/CHANGES TO OFFICERS A	NATURECTORS IN 12
TITLE	PS	DELETE	1.1 TITLE		ADDITIONS CHANGES TO GITTOERS A	Change Addition
NAME	RICHARDSON, MICHAEL C.		1.2 NAME		()	
STREET ADDRESS	5266 HWY AVE		1.3 STREET	ADDRESS 8/	15 South Main Street, acksonville, Florida 322	3 PIDOR
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-S	T-ZIP	acksonville, Florida 322	99
TITLE	Vī	☐ DELETE	2.1 TITLE			(Control of the cont
NAME	BRYMER, J. DENISE		2.2 NAME		5 South Main Street,	GT CIMP
STREET ADDRESS	5266 HWY AVE		23 STREET	ADDRESS 01	3 Oblight reach Officery	o Proce
CITY-SI-ZIP	JACKSONVILLE FL		2.4 CITY-5	51-ZIP J O	acksonville, Florida 3220	1
TITLE	D DANIDALI K	DELETE	3.1 TITLE			Dhange
NAME	GROGER, RANDALL K. 5266 HWY AVE		3.2 NAME	- di	5 South Main Street, acksonville, Florida 3220	5Th Floor
STREET ADDRESS	JACKSONVILLE FL		6.3 STREET	ADDRESS	akendille Florida 3000	-i
CITY-ST-ZIP TITLE	AS	DELETE	3.4. CITY - 9 4.1 TITLE	31-ZIP 31	LADUNITE, PUNCH STAU	Change Addition
NAME	STRICKLAND, BARBARA S		4. 2 NAME			
STREET ADDRESS	5266 HIGHWAY AVE		4.8 STREET	ANDRESE Q	15 South Main Street, acksonville, Florida 322	5th Floor
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-S	T-ZIP	acksmulk Flying 322	707
TITLE		DELETE	5.1 TITLE	<u> </u>	The state of the s	☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			53 STREET	ADDRESS		İ
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		DELETE	6.1 TITLE	T		Change Addition
NAME			6.2 NAME			
STREET ADORESS			6.3 STREET			
CITY-ST-ZIP		ings at issue the second	6.4 CITY-S		0	
14. I nereby o	certify that the information supplied with	i mis filing does not qualify fo	r the exempl	uon stated in	Section 119.07(3)(i), Florida Statutes, I further	certify that the information

4. I hereby corring that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(), 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 eath; that I am an officer or director of the corporation of 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 given an attachment with an address.

SIGNATURE:

Popert J. Price 01-19-9

904/390-7100