				 .	
FILE N	OW: FILING FEE	AFTER MAY 1 IS \$	225.00	-	
PROFIT CORPORATION ANNUAL REPORT		ELORIDA DEPARTMEN	FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State		
		42°C;			
		DIVISION OF CORP			
1996		(0)		_	
DOCUMENT # L70393		3 (8)			
	RANSPORT INC.			CARACIDIS DIS LODES AREAS INIO 484	8 B 1891 - Batul Daga l Busk a Basak Busha Basa k Bas ik Bas ik
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Principal Place of E	Business	Mailing Address			
% ALBERTO BA		% ALBERTO BATISTA	% ALBERTO BATISTA 60 E 3RD ST		
60 E 3RD ST HIALEAH FL 33010		HIALEAH FL 33010			3a. Date of Last Report
PRINCEPHINE				05/04/1990	08/03/1995 Applied For
2. Principal Place	of Business	2a. Mailing Address	W 31Qe.	4. FEI Number 65-0189904	Not Applicable
1 10417	NW 31 art.	26 /0 41 / // Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, e	IC.	27		6. Election Campaign Financing	\$5.00 May Be
City & State	26	City & State 28 MIAMI.	d _	Trust Fund Contribution	Added to Fees
23 M / 4 M	Country	Ζφ	Cour try	B. This corporation has liability or Florida Statutes Yes	intangible tax under s. 199.032, s. □ No
コー かんじし	25 9. Name and Address of Curre	pt Registered Agent	<u>'</u>	10. Name and Address of New	Registered Agent
	9. Name and Address of Corre		81 Name		
BATISTA	, Alberto		82 Street A	ddiess IP O Box Number is Not Ascept	%
60 E 3R			83		
	I FL 33010		84 City	MIAMI	FL 85 Zip Code 33/47
	667.05	an and 607 1508 Florida Statutes. U	1 1		- Calcanging its registered office
 Pursuant to or registered 	the provisions of Sections 607,050 Lagent, or both, in the State of Fig Land accept the obligations of, Se	irida. Such change was authorized to ohon 607.0505, Florida Statutes	by the corporation's t	poration submits this statement for the p board of directors. I hereby accept the ap	portunent as registrate 191
			Rojusteris Aprot signaturoro	namen where terrod titel	[M]E
S:	gratine, typed or printed harris of registered spr	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change
12.	DP	DELETE	1 11 TLE	0.	A · · · ·
NAME	BATISTA, ALBERTO		1.2 NAME 1.3 STREET ADDRESS	10417 NW 31 ac MIAMI. 28. 331	., ?
STREET ADDRESS	60 E 3RD ST HIALEAH FL		1.4 (TY - ST. ZIP	MIAMILA. DOI	Change Addition
CHY-ST-ZIP TITLE	DV	DELETE	2 1 TILE		=
NAME	BASTISTA, JUSTINA G.		2 2 NAME	10417 NW 31 Qx MIAMIL X. 3314	
STREET ADDRESS	60 E. 3RD ST., STE. 304		2.3 STREET ADDRESS 2.4 STY-ST-ZIP	MIAMI. 2. 3314	(7
CITY - ST - ZIP	HIALEAH FL	DELETE	3 1 IIILE		Change Addition
TITLE			3.2 NAME		
NAME STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34 C-TY - ST - ZIP		Change Addition
TITLE		DELETE	4 ° TITLE 4 2 NAME		
NAME			43 STREET ADDRESS		
STREET ADDRESS			44 CITY - ST - ZIF		☐ Change ☐ Addition
CITY - S1 - ZIP		☐ DELETE	5 I TITLE		Change Addition
NAME			51 NAME		
STREET ADDRESS			5: STREET ADDRESS		
CITY - ST - ZIP		DELETE	5 (I CHTY - ST - ZIF) 6 (I THLE		☐ Change ☐ Addition
TITLE		C) pertie	6 2 NAME		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished a id 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 certify 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

63 STREET ADDRESS

NAME

STREET ADDRESS

4-26-96 305 836 7402

CP