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

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # M00339

USA TRANSPORTATION, INC.



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90006 046 \*\*\*158.75

Principal Place of Business		Mailing Address			* (02) (03) (03) (03) (03) (03) (03)	31811 <b>81611</b> 81811	niem erém vees
1330 SOUTHEAST 4TH AVENUE SUITE D & E' C' (1) (4) FORT LAUDERDALE FL 33316		1300 Southeast 4th Avenue Suite D & E Fort Lauderdale FL 33316			DO NOT WRITE IN THIS	S SPACE	
IUS US					3. Date Incorporated or Qualifed		
					05/09/1984		]
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			59-2426723	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional equired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution Added to Fees		
Zip	Country		Zip Country		8. This corporation owes the current year Intangible		
24				Personal Property Tax. Yes No			□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
LEDER, NATHAN I 5200 BLUE LAGOON DR		Same and the same		Street Addi	ress (P.O. Box Number is Not Acceptable)		
anua e SUITE 600				<del> </del>			
4570 PO MIAMI FL-33126 F		APPRICATION ALSO		<u> </u>			
				City	. 1982 <u>136 (1985)</u> FI	_	Code
affice or a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was authoritions of, Section 607.0505, Florida	Statutes	the corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint the appointment of the purpose of the appointment of the appo	r changing it	egistered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg				gistered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.		OFFICERS AND DIRECTORS 1			ADDITIONS/CHANGES TO OFFICERS A	☐ Change	
TITLE	PST	☐ DELETE	1.1 TITLE			□ Sridings	,
NAME	BODENHAMER, WILLIAM H	į	1.2 NAME				
STREET ADDRESS	1			T ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-5	ST- ZIP		[*] Change	☐ Addition
TITLE		_	2.1 TITLE	i		ondingo	
NAME			2.2 NAME			•	1
STREET ADDRESS				T ADDRESS			)
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		☐ Change	Addition
TITLE		<del></del>	3.1 TITLE			□ Criange	Li Addition
NAME			3.2 NAME			-	
STREET ADDRESS	1			T ADDRESS	• 4		
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		Change	Addition
TITLE	1	☐ DELETE	4.1 TITLE			- U change	L. Advisori
NAME		<u> </u>	4. 2 NAME		·		
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	-01-21		4.4 CITY-5	ST- ZIP			☐ Addition
TITLE	TLE DELETE		5.1 TITLE			☐ Change	☐ Addition
NAME	521		5.2 NAME	Į.			

CITY-ST-ZIP 14. 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY+ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Change

Addition