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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 24 1997 8:00am Secretary of State

DOCUMENT # MOT120 1. Corporation Name MESWAY TRUCK RENTAL, INC.  Principal Place of Business Mailing Address 8609 SW 16TH STREET FT.LAUDERDALE FL 33324  Mailing Address FT.LAUDERDALE FL 33324  Mailing Address FT.LAUDERDALE FL 33324  Mailing Address				, A.U , , <u>, , , ,</u>				
					3. Date Incorporated or Qualified 05/31/1984		of Last Re 6/1996	eport
າ ່	Place of Business	2a. Mailing Ad	dress	~~+==	4. FEI Number		}	plied For
Suite, Apt	# plc	26 Suite, Apt.	# etc		65-0038795		\$8.75 /	t Applicable
	, n, 0.00	27	n, 010.		5. Certificate of Status Desired		Fee Re	
City & Sta	te	City & Stat	е		6. Election Campaign Financing	r)	\$5.00	
Ζφ	Country	28   Zip		Country	Trust Fund Contribution  8. This corporation has liability for	r istensible to	Added t	
	25	29	30			Yes		. 199.032,
		of Current Registered Agen	t	041 1	10. Name and Address of New R	egistered Ag	gent	
	lurice, robert 09 SW 16TH Street				AURORIA ROPIR			
	LAUDERDALE FL FL 33	324		82 Street Ad	dress (P.O. Box Number is Not Accepta	able)		
,				83				
				84 City			85 Zip (	Code
office or agent. L	to the provisions of Section registered agent, or both, in am familiar with, and accep	ns 607.0502 and 607.1508, Fic in the State of Florida. Such ch of the obligations of, Section 60	orida Statutes, the lange was author 07.0505, Florida	e above-named co rized by the corpor Statutes.	prporation submits this statement for the ation's board of directors. I hereby acception	purpose of cept the appoi	hanging it intment as	s registered registered
office or agent. I. IGNATURE 2. ILF	registered agent, or both, in arm familiar with, and accept signerous, typed or painted name of OFF PD MAURICE, ROBERT	in the State of Florida. Such choit the obligations of, Section 60 registered agent and the if applicable.	arige was author 07.0505, Florida : (NOTE: Regis DELETE 1	rized by the corpor Statutes. stered Agent signature req 13. 1.1 TITLE	ration's board of directors. I hereby acce pulled when reinstaling) ADDITIONS/CHANGES TO OFFI PD MAURICE, ROBERT	purpose of cept the appoint th	ntment as	registered
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office or agent. I. GNATURE  LEF ME REFT ADDRESS LY - SI - ZIP LEFT ADDRESS	registered agent, or both, is arn familiar with, and accept Signature, typed or present name of OFF PD MAURICE, ROBERT 252 PRINCIPALE ST. ST-DAMASE, QUEBE STD LAUBERTE, RAYMON 252 PRINCIPALE ST.	ri the State of Florida. Such chort the obligations of, Section 60 registered agent and title if applicable.  FICERS AND DIRECTORS  GC	OPELETE	stored Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ration's board of directors. Thereby accessively when reinstalky)  ADDITIONS/CHANGES TO OFFI PD MAURICE, ROBERT 814 Desormeaux	purpose of cept the appoint th	olRECTOR	IS IN 12
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by to execute this report as required by Chapter 607, Florida Statutes; and that my name

04/19/97

954-370-2257

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