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

PROFIT CORPORATION ANNUAL REPORT

1999

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M47163

CHRISTIAN BAYOU TRANSPORT, CO.

Mailing Address Principal Place of Business 3333 W KENNEDY BLVD 3333 W KENNEDY BLVD #207 DO NOT WRITE IN THIS SPACE #207 **TAMPA FL 33609 TAMPA FL 33609** 3. Date Incorporated or Qualifed US HS 02/25/1987 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-2747995 26 \$8.75 Additional 21 Suite, Apt. #, etc. 5. Certifcate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation owes the current year Intangible Country Zip Country Zio Personal Property Tax. 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SPIEGELFEDLD, ALLEN VON Street Address (P.O. Box Number is Not Acceptable) 82 **501 EAST KENNEDY BOULEVARD** 83 **SUITE 1800 TAMPA FL 33602** 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ☐ Addition 12. ☐ Change DELETE 1.1 TITLE TITLE 1.2 NAME PUNDSACK, ROBERT N. NAME 1.3 STREET ADDRESS 3333 W KENNEDY BLVD #207 STREET ADDRESS 1,4 CITY-ST-ZIP TAMPA FL ☐ Addition Change CITY-ST-ZIP DELETE 2.1 TITLE TITLE 2.2 NAME MOORE, JOHN THOMAS NAME 2.3 STREET ADDRESS 3333 W KENNEDY BLVD #207 STREET ADDRESS 2. 4 CITY-ST-ZIP TAMPA FL ☐ Addition CITY-ST-ZIP ☐ Change ☐ DELETE 3.1 TITLE TITS F 3.2 NAME CLEMENT, JOHN F NAME 3.3 STREET ADDRESS 259 E SCENIC DRIVE STREET ADDRESS 3.4. CITY-ST-ZIP PASS CHRISTIAN MS ☐ Change Addition CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition T DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Addition CITY-ST-ZIP ☐ Change 6.1 TITLE DELETE TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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.

FILED

Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90049 007 ***158.75