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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

M77105

(8)

E & K TRUCKING, INC.

FILED							
Apr	17	1998	8:00am				
Se	cre	tary o	f State				



Principal Place of Business Mailing Address					L MORACETI MI KADRE NODAL SIDIE CONDI ONNI	I DIBIS BOBIL BIBIL BIBIL LEDI
3206 N.W.	Y <mark>Môn</mark> ey management inc. 87th Avenue Prings Fl 33065	3206 N.W. 87TH AVEN	% TRI CITY MONEY MANAGEMENT INC. 3206 N.W. 87TH AVENUE CORAL SPRINGS FL 33085		DO NOT WRITE IN THI	S SPACE
O O O O	111199 72 99999	OF THE OF THE O			3. Date Incorporated or Qualified	
					04/19/1988	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0046426	Not Applicable
Suite, Apt.	. #, etc.	Suile, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the o	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	Registered Agent			10. Name and Address of New Registere	d Agent
1	VARÇO, KATHLEEN			81 Name		
3206 N.W. 87TH AVENUE				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
(CORAL SPRINGS FL 33065			83		
				84 City	F	85 Zip Code
office or	registered agent or both in the State.	of Florida, Such change was .	authorized	I by the corpor	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	of changing its registered
agent. I a	am familiar with, and accept the obliga	kions of, Section 607.0505, Fi	orida Stat	itos.	1/	108
SIGNATURE	Signature in Sor somed name of registered ager	un			Jurcd when reinstating) DATE	770
12.	OFFICERS AND		13.	Agent s grature req	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 Til	LE T	ADDITIONS/CHANGES TO OFFICE IN A	Change Addition
NAME	VARCO, EPIFANIO		1.2 NA			,
STREET ADDRESS	3206 N.W. 87TH AVENUE			REET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		- 1	Y-ST-7IP		
TITLE	D	DELETE	2.1 IF			Change Addition
NAME	VARCO, KATHLEEN	_	2 2 NA			
STREET ADDRESS	3206 N.W. 87TH AVENUE			REET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL			TY-SI-ZIP		
TITLE		DELETE	3.1 TH		**************************************	Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REE1 ADDRESS		j
CITY-ST-ZIP				IY-SI-ZIP	•	
TITLE		DELETE	4.1 113			Change Addition
NAME			4. 2 N	ME .		
STREET ADDRESS			4.3 ST	HEET ADDRESS		
CITY-ST-ZIP			4.4 Ci	Y-ST-ZIP		i
TITLE		DELETE	5.1 TIT			☐ Change ☐ Addition
NAME	1		5.2 NA	ME		
STREET ADDRESS			5.3 ST	REET ADDRESS		}
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	6.1 117			Change Addition
NAME			62 NA	ME		
STREET ADDRESS			6351	HEET ADDRESS		
CITY-ST-ZIP				Y-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.