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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M92445

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

CITY TRUCKING, INC.

Principal Plac	ce of Business	Mailing Address			ļ		
2359 SW 34TH		2359 SW 34TH ST.					
FT. LAUDERDALE FL 33312		FT. LAUDERDALE FL 33312			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					08/03/1988		l
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21 26					65-0071282	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				_	\$8.75 A	Additional	
27				5. Certifcate of Status Desired	Fee Re	quired	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 28					Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Ir	ntangible	
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered	i Agent	
				81 Name			
TABASKY, JASON				82 Street Addr	ress (P.O. Box Number is Not Acceptable)	<del></del>	
2359 SW 34TH ST.					, , , , , , , , , , , , , , , , , , , ,		<u> </u>
FT.	LAUDERDALE FL 33312			83	<del></del>		
				84 City		85 Zip C	Code
					oration submits this statement for the purpose of		
SIGNATURE	am familiar with, and accept the obl			Agent signature require	<u> </u>		
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP	☐ DELETÉ	1,1 ∏	LE .		☐ Change	Addition
NAME	TABASKY, JASON		1.2 N	WE			
STREET ADDRESS			1.3 S	REET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	2.1 Π	rue		Change	Addition
NAME			2.2 N	ME I			
STREET ADDRESS	5		2.3 \$7	REET ADORESS			
CITY-ST-ZIP			2.40	ITY-ST-ZIP			
TITLE	<b>\</b>	☐ DELETE	3.1 ™	ne		Change	☐ Addition
NAME			3.2 N	ME			
STREET ADDRESS	3		3.3 S	REET ADDRESS			
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP			
TITLE		DELETE	4.1 ΤΙ	rle		Change	☐ Addition
NAME			4. 2 N	AME			
STREET ADDRESS	s[ ,		4.3 S	REET ADDRESS			
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	5.1 TI			Change	☐ Addition
NAME			5.2 N	•	•		
STREET ADDRESS	,		5.3 S	REET ADDRESS			

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, pr on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

☐ Addition

☐ Change

CR2E034 (11/98)

May 04, 1999 8:00 am Secretary of State

05-04-1999 90118 008 \*\*\*150.00