

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 19, 1999 8:00 am
Secretary of State

02-19-1999 90114 021 ***150.00

DOCUMENT # N37870

1. Corporation Name

**FLORIDA TRANSPORTATION SERVICES ASSOCIATION AND
MEMBERS, INC.**

Principal Place of Business

3109 NW 27 AVENUE
MIAMI FL 33142
US

Mailing Address

P.O. BOX 420769
MIAMI FL 33242



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/27/1990

4. FEI Number
65-0206961

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

PIERRE-LOUIS, FERNAND
3109 NW 27 AVENUE
MIAMI FL 33142

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *FERNAND MERDE-LOUIS* **FERNAND MERDE-LOUIS** *12/11/99* **2.5.99**

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P**
PIERRE-LOUIS, FERNAND
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE

NAME **VP**
HERNANDEZ, CANDIDO
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE

NAME **TP**
LOPEZ, ENRIQUE
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE

NAME **D**
LOPEZ, ORLANDO
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE

NAME **D**
GONZALEZ, CRISTOBAL
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE

NAME **D**
HERNANDEZ, GILBERTO
STREET ADDRESS **3109 N.W. 27TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33142**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 617, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)