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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P01776

(4)

MOTOR RAIL DELIVERY INC., OF FLORIDA Principal Place of Business Mailing Address 1267 EAST 8 MILE ROAD 1267 EAST 8 MILE ROAD FERNDALE MI 48220-2636 FERNDALE MI 48220-9636 3. Date Incorporated or Qualified 3a. Date of Last Report 04/26/1984 02/06/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 38-2373292 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Country Country ZID 8. This corporation has liability for intangible tax under s. 199.032, ☐ No Yes 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name SCHULTZ, MATTHEW 6033 E BROADWAY Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33619** 83 84 City Zip Code 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 fam fam with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regionared agent and tile if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 DELETE PTD 1.1 TITLE ☐ Change Addition TITLE SCHULTZ, EDWARD M. 1.2 NAME NAME 4237 CYPRESS 1.3 STREET ADDRESS STREET ADDRESS TROY MI 1.4 CITY-ST-ZIP City - S1 - ZIP Addition DELETE Change VD 2.1 TITLE 71116 SCHULTZ, MATTHEW M. 2.2 NAME NAME 2599 W. BAY ILLE DR SE 2.3 STREET ADORESS STREET ADDRESS ST PETERSBURG FL CHTY+ST+ZIP 2 4 CITY - ST-ZIP DELETE Change Addition SD 31 TITLE THE SCHULTZ, PAUL E NAME 3.2 NAME 904 MONTROSE 3.3 STREET ADDRESS STREET ADDRESS ROYAL OAK MI 3.4. CITY - ST - ZIP Off y - \$1 - 7 P DELETE Change Addition THE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CUTY - ST-- ZIP 4.4 CITY - ST- ZIP Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 CITY - \$7 - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAM² 6.3 STREET ADORESS STREET ADDRESS COTY - ST - 7IP 6.4 CITY-ST-ZIP

14. I do 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

I am an officer or director of the corporation or the receiver or trustee empower

appears in Block 12 or Blo

SIGNATURE:

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 empowers to execute this report a required by Chapter 607, Florida Statutes; and that my name

FILED Feb 19 1997 8:00am Secretary of State

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