


CHK#1734.

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$238.25).

FILED
Jul 29, 1999 8:00 am
Secretary of State
07-29-1999 90022 007 *****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P12 000025740					
1. Corporation Name C. TERTUS TRUCKING, INC.					
Principal Place of Business 2625 GREENFIELD AVE ORLANDO FL 32808			Mailing Address 2625 GREENFIELD AVE ORLANDO FL 32808		

2. Principal Place of Business 21. <u>Same</u>		2a. Mailing Address 26. <u>Same</u>		3. Date incorporated or Qualified 10/07/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-3033487	
22. City & State		27. City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country	

9. Name and Address of Current Registered Agent TERTUS, CLAUDE 2625 GREENFIELD AVE ORLANDO FL 32808		10. Name and Address of New Registered Agent 81. Name <u>None</u> 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City <u>FL</u> 85. Zip Code	
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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

Signature, typed or printed name of registered agent and the applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERTUS, CLAUDE	1.2 NAME	
STREET ADDRESS	2625 GREENFIELD AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	1.4 CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERARD, ROSENELLE	2.2 NAME	
STREET ADDRESS	2625 GREENFIELD AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERTUS, RODRIGUE	3.2 NAME	
STREET ADDRESS	2625 GREENFIELD AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERTUS, THEODORE	4.2 NAME	
STREET ADDRESS	2625 GREENFIELD AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERTUS, LORIANNE	5.2 NAME	
STREET ADDRESS	2625 GREENFIELD AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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] TERTUS.

7/26/99 (407) 298-7291

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/99)