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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| Principal Place 505 SOUTH FI SUITE 1330 | EAST AUTO TRUCKING, INC BE OF Businoss LAGLER DRIVE BEACH FL 33401 | Mailing Address SOUTHEAST AUTO TRUC 1490 S. MILITARY TRAIL. W. PALM BEACH FL 3341 | STE 13-A | | | | |
|--|--|---|---|--|--|----------------------------------|------------------------------|
| | | US | | | 3. Date Incorporated or Qualified 12/23/1992 | 3a. Date of Last F 05/01/1996 | Report |
| | ncipal Place of Business 190 S. MILITARY TRAIL 26 | | | ~ ~ ~ | 4. FEI Number 65-0383091 | A | pplied For lot Applicable |
| Sulte, Apt. | | Suite, Apt. #, etc. | N.L.L. | | 5. Certificate of Status Desired | □ \$8.75 | Additional teguired |
| City & Stat | | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution | | | |
| Zip Country 24 33415 25 USA | | Zip 29 | Zip Country | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No | | |
| 241 0 1 | 9. Name and Address of Current | | 1301 | | 10. Name and Address of New Re | | |
| KERR, RANDALL, R 6364 13TH ROAD SOUTH WEST PALM BEACH FL 33415 | | | 81 82 83 | Name Street Add | iress (P.O. Box Number is Not Acceptat | | Code |
| 11, Pursuant office or r agent. I a SIGNATURE | to the provisions of Sections 607.0502 egistered agent, or both, in the State orm familiar with, and accept the obligations of the obligation of the obligat | | les, the above authorized by orida Statutes | o-named corpora the corpora | poration submits this statement for the patients to the patients of directors. I hereby acception with the patients of the pat | FL T | |
| 12. | OFFICERS AND | | 13. | uit eignara-p redo | ADDITIONS/CHANGES TO OFFICE | | RS IN 12 |
| TITLE | PSD | DELETE 1.1 TIT | | - | | Change | Addition |
| NAME | KERR, RANDALL, | | 1.2 NAME | 1 | | |)3 |
| STREET ADDRESS | | | 1.3 STREET ADDRESS | | | | } |
| CITY-ST-ZIP | WEST PALM BEACH FL 33415 | *************************************** | 1.4 CITY - S | T - ZIP | | | |
| TITLE | ☐ DÉLETE 2 | | 2.1 TITLE | | | Change | Addition C |
| NAME | l l | | 22 NAME | | • | | |
| STREET ADDRESS | | | 2.3 STREET | | | | 1 |
| CITY-ST-ZIP TITLE | DELETE | | 2.4 CITY-5 3.1 TITLE | 51 - ZIP | ** | Change | Addition |
| NAME | L_J DECCIE | | 3.7 M/CC | | | f_1 Ciliange | L. ADOILION |
| STREET ADDRESS | | | 3.3 \$1REE! | ANDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY - 5 | | | | 1 |
| TITLE | | DELETE | 4.1 TITLE | | | Change | Addition |
| NAME | | | 4.2 NAME | ļ | | | ţ |
| STREET ADDRESS | | | 4 3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 City-S | 1 - ZIP | | | |
| TITLE | □ DELĒTE 5.1 | | 5.1 TITLE | } | | Change | ☐ Addition |
| NAME | | | 5.2 NAME | Ī | | | 1 |
| STREET ADDRESS | | | 53 STREET | | | | |
| CITY-ST-ZIP | | ☐ DELETE | 5.4 CITY-S | I - ZIP | | Change | Additon |
| TITLE | | ← neces | 6.1 TATLE | | | L Change | ☐ Addition |
| NAME STREET ANDRESS | | | 6.2 NAME 6.3 STREET | ADDRESS | | | 1 |
| STREET ADDRESS CITY-ST-ZIP | | | 4 | - 1 | • | | } |
| 14. I do heret | by certify that the Information supplied | with this filing does not qualit | 64 DITY-S fy for the exe | | d in Section 119.07(3)(i). Florida Statuto | s. 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 eath; 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, Fiorida Statutes; and that my name appears in Block 12 or Block 13 in changed, or on an attachment with an address.