SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 JUL 27 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000004503 (7)**

1. Corporation Name
PRESTIGE TRUCKING, INC.

Principal Place of Business	Mailing Address
7228-C WESTPORT PL WEST PALM BEACH FL 33413 US	7228-C WESTPORT PL WEST PALM BEACH FL 33413 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/14/1993	3a. Date of Last Report: 08/10/1994
4. FEI Number: 65-0389399	☐ 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MAHONEY, BRIAN
~~7796 BELVEDERE RD~~ 7228 WESTPORT PLACE
W PALM BCH. FL 33411 BUILDING C
WEST PALM BCH, FL 33413

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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS IN 1995	
TITLE	~~P/STD~~	11 TITLE	☒ Change ☐ Addition PRESIDENT
NAME	MAHONEY, BRIAN	12 NAME	BRIAN MAHONEY
STREET ADDRESS	~~7796 BELVEDERE RD~~	13 STREET ADDRESS	7228 WEST PORT PLACE, BLDG C
CITY-ST-ZIP	W PALM BCH. FL 33411	14 CITY-ST-ZIP	WEST PALM BCH, FL 33413
TITLE		21 TITLE	☐ Change ☒ Addition SECRETARY
NAME		22 NAME	ANN-LEE CORNELIUS
STREET ADDRESS		23 STREET ADDRESS	7228 WESTPORT PLACE BLDG C
CITY-ST-ZIP		24 CITY-ST-ZIP	WEST PALM BEACH, FL 33413
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ann Lee Cornelius 7/26/95 407-478-8980
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ANN-LEE CORNELIUS

0002026 CP