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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P93000007213 (0)

HIS TRANSPORT INC

O.O. IIIn						
Principal Place	e of Business	Mailing Address			-{	
941 N. SR 7		941 N. SR 7			1	
PLANTATION FL	_ 33317		PLANTATION FL 33317-1514			
					;	
				<u></u>	01/25/1993 0	Date of Last Report <b>2/27/1996</b>
L	ace of Business	<b>2a.</b> Mailing Address			4. FEI Number	Applied For
21	h ate	Suite, Apt. #, etc.		····	65-0381332	Not Applicable
Suite, Apt. #, etc.		·	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country Zip Con		Country	у	8. This corporation has liability for intangible tax under s. 199.032,	
24	25 29 30		30		Florida Statutes Yes No	
					10. Name and Address of New Registers	d Agent
	D, ART		[8]	Maine	_ · · ·	
	n. SR 7 Ntation FL 33317		62	Street Addr	ress (P.O. Box Number is Not Acceptable)	
PLA	TIATION FL 33317		83	<u> </u>		
			84	City	F	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 Signature, speed or printed name of registered agent and title Papplicable (NOTE: Registered Agent signature required when relinstating)  DATE  OPTION OF THE PAPPLICABLE PAPPLI						
12.		S AND DIRECTORS (NOTE	Registered Ag	jent signature requir	red when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	
TOLE	DP	DELETE	1.1 TITLE		1001110710101101011011011011011011011011	Change Addition
NAME	BOND, ART		1.2 NAME			-
STREET ADDRESS	941 N STATE ROAD 7		1.3 STREE	T ADDRESS		
City-St-7iP	PLANTATION FL		1.4 City-	ST-ZIP		
THE	VP.	☐ DELETE	21 TIYLE			☐ Change ☐ Addition
NAME	BOND, DAVID		2.2 NAME			
STREET ADDRESS	941 N S.R. 7 PLANTATION FL			T ADDRESS		
CHY-SE-7IP	FLANIATION FL	DELETE	2 4 CITY- 3.1 TITLE	ST-ZIP		Change Addition
NAME		[_] bittie	3.1 MILE 3.2 NAME			CT Change CT Modition
SURFEL ADDRESS				T ADDRESS		
City - S* - 7lift			3.4. CITY-	1		
TIRE		DELETE				Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY+51-202	· · · · · · · · · · · · · · · · · · ·		4.4 CITY -	ST-ZIP		
THE		☐ DELETE	5.1 TITLE			Change Addition
NAMi			5.2 NAME			
STREET ADDRESS			•	T ADDRESS		
CITY - ST - 7IP TITLE		DELETE	5.4 City -: 6.1 Title	ST-ZIP		Change Addition
NAME			6.2 NAME			La Change La Modition
STREET ADDRESS			•	T ADDRESS		
CHY-S1-7IP			6.4 CITY-			
14. Ldo hereb	y certify that the information sup	polied with this filing does not qualif	v for the exi	emption stated	d in Section 119.07(3)(i), Florida Statutes. I furt	her certify that the
information Lam an of	n indicated on this annual repor ficer or director of the corporati	t or supplemental annual report is tr on or the receiver or trustee empow	rue and acc ered to exe	urate and that cute this repor	t my signature shall have the same legal effect rt as required by Chapter 607, Florida Statutes	as it made under oath; that and that my name
appears in	n Block 12 or Block 13 if change	ed, or brijan atjachment with/sh add	lress.	•	·	-

SIGNATURE:

SIGNATURE AND TYPE

**FILED** 

Apr 07 1997 8:00am

Secretary of State