SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMDUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000028495	/Q\
1. Corporation Name	P93000028495	(B)

DARN-PEARL TRUCKING INC.						
Principal Place of Business Maiting Address 1783 DAYTONA LANE 1783 DAYTONA LANE		T CORREGOR THE LOUDE CIVIL BOOKS BEING BOWN BOWN BOWN WHITE STATE VALUE ONLY (69)				
JACKSONVILLE FL 32218	JACKSONVILLE FL	32218		3. Date Incorporated or Qualified 04/19/1993	3a. Date of Last Report 02/02/1995	
2. Principal Place of Business	2a. Mailing Address	3		4. FEI Number	Applied For	
21	26			59-3183302	Not Applicable	
Suite, Apt. #, etc.	Suile, Apt #, et	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25	Z _I p 29	Zip Country		8. This corporation has liability for intangible tax under s 199 032. Florida Statutes Yes No		
	s of Current Registered Agent			10. Name and Address of New Reg		
PERRY, PEARLIE M		81	Name			
1783 DAYTONA LANE JACKSONVILLE FL 32218		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
		83	3			
		84	City		FL 85 Z:p Code	
agent Tamifamiliar with, and access SIGNATURE Signature typed in partial movement.	of the obligations of, Section 607.050	05, Florida Statule	5		7-26-96	
	FICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
NAME PERRY, PEARLIE M	D£L£				Change Addition	
STREET ADDRESS 1783 DAYTONA LAI		1.2 NAME	TADDRESS			
CITY-ST-ZIP JACKSONVILLE FL.		1.4 CITY -				
TIFLE	DELE		31-20		Change Addition	
NAME	_	2.2 NAME				
STREET ADDRESS		2.3 \$*REE	1 ACORESS			
C(TY - ST - ZIP		2 4 CHY	- ST - Z1P			
TITLE	L DELE	TE 3.1 TITLE			Change Addition	
NAME		3 2 NAME				
STREET ADDRESS			LADDRESS			
CITY - ST - ZIP TITLE	DELF	3.4 CITY	· ST - ZIP		Change Addition	
NAME	[] b[it	1 4 1 TITLE 4 2 NAMI			Change Madition	
STREET ADDRESS			T ADDRESS			
CITY-ST-ZIP		4.4 CITY -				
TITLE	DELE				Change Addition	
NAME	_	5.2 NAME				
STREET ADDRESS			LADDRESS			
CITY - ST - ZIP		5 4 C(1 Y -				
TITLE	DELE				Change Addition	
NAME		6.2 NAME				
STREET ADDRESS		63STREE	T ADORESS			
CITY - ST - ZIP		€4011.		ify for the exemption stated in Section 1		

further certify that the information supplied with installing is voordanly tonersed and oces not quanty for the exemption stated in Section 19.07(3)(x) Florida statutes in further certify that the information indicated on this arrival 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. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR