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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # pagnongggag (6)

1. Corporation	OCK HAULERS, INC.	,000 <u>2</u> 042 (0)				
Principal Place of Business Mailing Address						
33406 OHIO AVE 33406 OHIO AVE						
RIDGE MANOR FL 33525 RIDGE MANOR FL 33525					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					04/30/1993	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number Applied Fo	or
21 26				<b>59-3195423</b> Not Applic	elde	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22					5. Certificate of Status Desired S8.75 Additions Fee Required	al
City & State City & State 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	<b>,</b>
Zip	Country	Zip	Country		This corporation owes or has paid the current year Intangible	
24	25 29		30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cur	ent Registered Agent	81	Name	10. Name and Address of New Registered Agent	
	OTH, WILLIAM J.		•	Name		
i	IOS OHIO AVE.		82	Street A	Address (P.O. Box Number is Not Acceptable)	
עווא	GE MANOR FL 33525		83	1		
			84	City		
				1	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607.1508, Florida <b>Statu</b> ile of Florida. Such change was	tes, the abov	e-named o	corporation submits this statement for the purpose of changing its registe location's board of directors. I hereby accept the appointment as register	ed ed
agent. La	m familiar with, and accept the ob	igations of, Section 607.0505, Fl	orida Statute	S.	orano source of an octor of the cost of th	
SIGNATURE	Signature, typed or printed name of registered	goent and title if applicable. (NO)	E: Registered Ac	ent sionature r	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	☐ DELETE			Change Add	dition
NAME	BOOTH, WILLIAM J		1.2 NAME			
STREET ADDRESS	33406 OHIO AVE			T ADDRESS		
CITY-ST-ZIP TITLE			1.4 CITY-	ST-ZIP	☐ Change ☐ Ado	dition
NAME			2.1 TITLE 2.2 NAME		Cilanga Cil Auc	ווטווונ
STREET ADDRESS			2.3 STREET ADDRESS			ı
CITY-ST-ZIP			2. 4 CITY-		Sec. 1	ļ
TITLE		DELETE 3.			Change Add	ition
NAME			3.2 NAME			
STREET ADDRESS				FADORESS		
CITY-ST-ZIP TITLE	DELETE		3.4. CITY-	ST-ZIP	Diame.	lition
NAME		☐ OELCIE	4.1 TITLE 4.2 NAME		☐ Change ☐ Add	muvii
STREET ADDRESS				ADDRESS		Ì
CITY-ST-ZIP			4.4 CITY - S			
TITLE	DELETE		5.1 TITLE		Change Add	lition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP	<u></u>	Decem	5.4 CITY-5	ST-ZIP	F	
TITLE		☐ DELETE	6.1 TITLE	[	☐ Change ☐ Add	Ition
NAME STREET ADDRESS			6.2 NAME	10000100		l

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

Mar 03 1998 8:00am

Secretary of State