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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000033412 (6)

DIXIE TRUCKING, INC.

incipal Place of Business	Mailing Address	
918 40TH TERRACE S.W. APLES FL 33999 S	1918 40TH TERRACE S.W. NAPLES FL 33899 US	
Principal Place of Business	2a. Mailing Address	
Principal Place of Business	2a. Mailing Address	· · · · · · ·

FILED Feb 16 1998 8:00am Secretary of State



Principal Plac	e of Business			Mailing	Address					f 18811881 110 taine tillt 68111 88111 88111		#1 # # 1 # 1	i & tida i nas	
1918 40TH TERRACE S.W. 1918 40TH TERRACE S. NAPLES FL 33999 NAPLES FL 33999			V.				DO NOT WRITE I	NI THIS SPAC	·E					
US				US					ŀ	3. Date Incorporated or Qualified	A THIS SI NO	<u> </u>		
										05/06/1993				
2. Principal P	Place of Busine	oss		2a. Ma	ling Address					4. FEI Number		Ar	oplied For	
21				26					İ	65-0411714		Not Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.							☐ \$t		Additional	
22				27						5. Certificate of Status Desired	ш '	Fee Re	equired	
City & State				City & State						6. Election Campaign Financing	\$	5.00	May Be	
23				28						Trust Fund Contribution		\dded	to Fees	
Zip	-	Country		<i>Z</i> ıp		\vdash	Country			8. This corporation owes or has paid		_	_ ~	
24		25		29		30	L			Personal Property Tax due June 3			J No	
			s of Current R	egistered	Agent		81	Mana		10. Name and Address of New Regi	istered Agen	<u> </u>		
	HL, TERESA						 "	Name	!					
	18 40TH TEF PLES FL 331						82	Street	Addres	s (P.O. Box Number is Not Acceptable	9)		<u>, </u>	
100	ruco re 33	999					83							
							84	City			. 85	Zip	Code	
							\Box		·- ·-		FL "	Ļ		
office or r	egistered age	ent, or b oth,	in the State of a	Florida S	008, Florida Statut uch change was a tion 607,05 <mark>05, F</mark> l	authorize	d by	the corp	poration	ation submits this statement for the purific board of directors. I hereby accept	rpose of char the appointm	ent as	registered	
SIGNATURE														
	Signature, lyped o		if registered agent ar FICERS AND D				d Age	nt signature	e required o	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DID	COTOF	10 111 40	
12.	В	- Or	TICERS AND D	HECTOR	DELETE	13. 1.1 Ti	T4 E		T	ADDITIONS/CHANGES TO OFFICE		hange	Addition	
NAME	YAHL, TE	DECA			☐ 0ccc,r	1.2 N					٠ ـــا	nango		
STREET ADDRESS	675 27TH							ADDRESS					ļ	
	NAPLES						ITY-ST							
CITY-ST-ZIP TITLE	V				DELETE	2.1 11		- ZIF	 		П	hange	Addition	
NAME	YAHI RI	CHARD D				2.2 N								
STREET ADDRESS		E RIDGE E	:XT					ADDRESS						
CITY-ST-ZIP	NAPLES		.~!			1	HTY-S							
TITLE	8				DELETE	3.1 11		1 4-21	 			hange	Addition	
NAME	YAHL, JE	AN				3.2 N						•		
STREET ADDRESS		ë ridge e	XT			3.3 S1	TREET A	ADDRESS						
CITY-ST-ZIP	NAPLES		•.			3.4. 0	ITY-S	T- 7 IP)					
TITLE	T	_			DELETE	4.1 TI			1			hange	Addition	
NAME	HUFF, KE	LLY G				4. 2 N	AMF							
STREET ADDRESS		H AVE SW	1			4.3 ST	REET A	ADDRESS						
CITY-ST-ZIP	NAPLES	FL				4.4 CI	1y-\$1	- ZIP	1					
TITLE					DELETE	5.1 TJ	7LE					hange	Addition	
NAME						52 N/	AME	j						
STREET ADDRESS						5.9 \$1	REET A	ADDRESS						
CITY-ST-ZIP						5.4 CI	TY-ST	- ZIP						
TITLE					DELETE	6.1 Ti	TLE					hange	Addition	
NAME						6.2 N/	AME						1	
STREET ADDRESS	•	_				6.3 \$1	REFT A	ADDRESS					İ	
CITY-ST-ZIP		Δ				6 4 Ct	TY-SI	- ZIP						

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 opporation 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 chapted, or on an attachment with an address.