## 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 # P93000034075 (0)

BHS TRUCKING, INC.

## FILED Mar 20 1998 8:00am Secretary of State

Principal Place	a of Business	Mailing Address				L LOUPERDON REG ADION ARTHUR GOARS OUTER DONN GOLOGO		<b>av</b> i (## 100)
4331 BANKS ROAD 4331 BANKS ROAD MIDDLEBURG FL 32068 MIDDLEBURG FL 32068								
IMPORTABLE ALONG						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						04/29/1993		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	<i>F</i>	Applied For
21		26				59-3178122	<u> </u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27				<u></u>		Required
City & State	•	<del>   </del>	City & State			6. Election Campaign Financing		May Be
Zin Country		28 Country				Trust Fund Contribution		to Fees
Zip Country		Zip				6. This corporation owes or has paid the c		ntangible     No
24	25 Name and Address of Curre	29 Agent	<u> </u> 30			Personal Property Tax due June 30.  10. Name and Address of New Registered		<u> </u>
MY.	TCHER, H B	in nogototo rigent		81	Name	In the state of th	, Agoin	
4331 BANKS ROAD MIDDLEBURG FL 32068				82	Street Addres	ss (P.O. Box Number is Not Acceptable)		l
WILL	DUEDUNG FL 32000		ľ	83				
				84	City	F	85 Zip	Code
44 Pursuant t	o the provisions of Sections 607.05	02 and 607 1508 Florida Statu	les the al	20V8-1	named corpo	ration submits this statement for the purpose		its registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change was:	authorized	d by t	he corporatio	n's board of directors. I hereby accept the ap	pointment a	s registered
	m familiar with, and accept the obliq	gations of, Section 607.0505, Fi	onda Siai	utes.				]
SIGNATURE .	Signature, typed or printed harne of registered as	pent and title if applicable (NO)	E Registered	Agent	s-gnature required	when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	1D DIRECTO	RS IN 12
TITLE	PS	DELETE	1.1 TH	1.1 TITLE			☐ Change	☐ Addition
NAME	HATCHER, H B		1.2 NAMI					
STREET ADDRESS	4331 BANKS ROAD		1.3 STREE		DDRESS			1
CITY-ST-ZIP	MIDDLEBURG FL 32068		1.4 Cf	TY-ST-	ZIP			
TITLE	Vī	DELETE	2.1 TIT	TLE	7		Change	Addition
NAME	HATCHER, SHIRLEY W		2.2 NA	ME				
STREET ADDRESS	4331 BANKS ROAD	2.3		2.3 STREET ADDRESS				
CITY-ST-ZIP	MIDDLEBURG FL 32068		2. 4 CITY-		ZIP			
TITLE		DELETE	3.1 TIT	LE			☐ Change	Addition
NAME			3.2 NAME					J
STREET ADDRESS			3.3 ST	REET AC	DOMESS			
CITY-ST-ZIP			3.4. CI	TY-ST-	ZIP			
TITLE		DELETE	4.1 TIT	LE			Change	☐ Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET AC	ODRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-	ZIP			
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 \$1	REET AD	DRESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-	ZIP			
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET AD	DDRESS			1
CITY-ST-ZIP			6.4 CIT	Y-ST-2	ZIP			
	ertify that the information supplied v	with this fiting does not qualify for	or the exe	mptio	n stated in Se	ection 119.07(3)(i), Florida Statutes. I further o	ertify that th	e information

14. I hereby certify that the information supplied with this fitting 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change!, or on an attachment with an address.

CONSTUDE Nacher Mr. Hatcher

3/15/98 904-282-2211