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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000062645 (5)

EXPRESS HAULING, INC.

Principal Place of Business

7

Mailing Address

## FILED Apr 07 1998 8:00am Secretary of State



541 S.W. 122 AVE. 541 S.W. 122 AVE. MIAMI FL 33184 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/08/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 65-0434506 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired 22 Fee Required 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yos 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name RODRIGUEZ, BEATRIZ M 541 S.W. 122 AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33184** 63 84 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE RODRIGUEZ, BEATRIZ M NAME 1.2 NAME 541 S.W. 122 AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33184** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Снапое Addition TITLE 2.1 TITLE NAME PINEDA, JESUS 2.2 NAME 11522 N.W. 87 PLACE STREET ADDRESS 2.3 STREET ADDRESS HIALEAH GARDENS FL 33016 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 Till(F TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE \_\_\_ Change Addition 6110HE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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.

BEALTIPE. 83.01038 804010400 PD816462. Posside n 1 4-3-98 (305)554-88441