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

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

FILED Apr 28 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra S. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS P93000070234 (8) DOCUMENT # D & B TRANSPORT, INC. Principal Place of Business Mailing Address F9 LINCOLN COURT **F9 LINCOLN COURT** LAKELAND FL 33805 LAKELAND FL 33805 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1993 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3201330 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country ZID 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 STOJKIC, T J 1517 COMMERCIAL PARK DRIVE Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33801 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change TITLE 1.1 TITLE **BROWN, ALONZO** 1.2 NAME NAME F9 LINCOLN COURT STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL 33805 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE DIXON, WILLIE J NAME 2.2 NAME 1405 ALAMEDA DRIVE 2.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33805 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Channe Addition 3.1 TIME TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-S1-2IP 3.4. CITY - ST - ZIP DELETE Change ■ Addition 4.1 TRLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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. BYOUN WILL HlonZo

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

DELETE

Addition

Change