FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000071209 (9)**

1. Corporation Name
PREMIER GROUND TRANSPORTATION SERVICES, INC.

Principal Place of Business
8251 15TH STREET E
SUITE C
SARASOTA FL 34243

Mailing Address
8251 15TH STREET E
SUITE C
SARASOTA FL 34243

3. Date Incorporated or Qualified: **10/07/1993**
3a. Date of Last Report: **04/27/1995**

2. Principal Place of Business
21
22 Suite, Apt. #, etc. Suite-U
23 City & State: 1410 Commerce Blvd Sarasota, FL.
24 Zip: 34243
25 Country: U.S.A.

2a. Mailing Address
26
27 Suite, Apt. #, etc. Suite-U
28 City & State: 1410 Commerce Blvd Sarasota, FL.
29 Zip: 34243
30 Country: U.S.A.

4. FEI Number: **65-0453813** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
RESENDIZ, JORGE
8251 15TH STREET E
SUITE C
SARASOTA FL 34243

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 of Registered Agent (Corporate Officer if Corporate Registered Agent) — Print Registered Agent signature (signature required when resigning) — DATE

12. OFFICERS AND DIRECTORS

TITLE P NAME RESENDIZ, JORGE STREET ADDRESS 1795 OAK LAKES DR CITY, ST, ZIP SARASOTA FL	☐ DELETE	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	☐ Change ☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	☐ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Jorge Resendiz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-96 (941) 351-1291
Date — Daytime Phone #

CR2E034 (12/95)