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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P93000086612 (7)

OVERLAND AUTO & TRUCK TRANSPORT, INC.

| | | | | | | | İ | | | |
|---|---|--------------|---------------------|-----|------------------|--|--|--|------------------|--|
| Principal Place of Business Mailing Address | | | | | | | - FAMENDU CON IDION CINI BOUT MATER ANNU MAIAR MAIN MINER DESDI COUNT UND UI | 111 | | |
| 11852 54TH ST. N. 11852 54TH ST. N. ROYAL PALM BCH. FL 33411 ROYAL PALM BCH. FL 33411 | | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | | 3. Date Incorporated or Qualified 12/15/1993 | | |
| 2. Principal P | ace of Business | 2a. 1 | 2a. Mailing Address | | | | | 4. FEI Number Applied F | or | |
| 21 | | 26 | | | | | | 65-0590472 Not Appl | icable | |
| Suite, Apt. | | 27 | I I | | | | | 5. Certificate of Status Desired S8.75 Addition Fee Required | | |
| City & State | | 28 | | | | | | 6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fee | | |
| Zip | Country | | žφ | | ountry | | | 8. This corporation owes or has paid the current year Intangible | • | |
| 24 | | | | 30 |) | | | Personal Property Tax due June 30. | | |
| g, Name and Address of Current Registered Agent | | | | | | 10. Name and Address of New Registered Agent | | | | |
| | lmes, mildred m | | | | 81 | Name | 9 | | | |
| 11852 54TH ST. N | | | | | 82 Street Addres | | | ss (P.O. Box Number is Not Acceptable) | | |
| RO | YAL PALM BEACH FL 3341 | 1 | | | 83 | | | | | |
| | | | | | | | | | | |
| | | | | | 84 | City | | FL es 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 | | | | | | | | | | |
| | Signature, typed or printed name of reguler | | <u> </u> | | | nt signatu | re required | d when reinstating) DATE | | |
| 12. | DPT | S AND DIRECT | DELETE | 13 | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 | ddition | |
| TITLE | | | L. UELERE | • | TITLE | | 1 | L. Change L. A | ן ויטואטט.] | |
| NAME | HOLMES, MILDRED M | DTU | | | NAME | | | | j | |
| STREET ADDRESS | 11852 54TH STREET NO | | 4.4 | | | ADDRESS | 5 | |] | |
| CITY-ST-ZIP | ROYAL PALM BEACH FL | . 33411 | Districts | | CITY-S | T-ZIP | _ | | 4.000 | |
| TITLE | DVS | | DELETE | E | TITLE | | 1 | L. Change L. A | ddition | |
| NAME | HOLMES, MILDRED M | DTU | | | NAME | | | | | |
| STREET ADDRESS | 11852 54TH STREET NO | | | | | address | } | | - | |
| CITY-ST-ZIP | ROYAL PALM BEACH FL | . 33411 | No. ctr | | CITY-S | IT-ZIP | | | d all the second | |
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| TITLE | | | DELETE | - 1 | TITLE | | 1 | Change A | ddition | |
| NAME | | | | | NAME | | 1 | | | |
| STREET ADDRESS | | | | | | ADDRESS | · | | İ | |
| CITY-ST-ZIP | | | | | CITY-S | T-21P | | | | |
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| NAME | | | | | NAME | | 1 | | | |
| STREET ADDRESS | | | | 6.3 | STREET | ADDRESS | ; J | | ļ | |

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 supplientental 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: Mildred M Holmes

CITY-ST-ZIP

414198

(561) 2524002

FILED

May 13 1998 8:00am

Secretary of State

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