

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

FILED
Mar 12 1996 8:00 am
Secretary of State

DOCUMENT # P94000013663 (7)

1. Corporation Name

NATIONAL TRANSPORTATION ASSOCIATES, INC.

Principal Place of Business

9470 S MILITARY TRL 1C
BOYNTON BEACH FL 33436

Mailing Address

900 SE 1ST STREET
#1
BOYNTON BEACH FL 33435
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

KERN, KEITH D
441 SE 2ND ST
DELRAY BEACH FL 33483

3. Date Incorporated or Qualified

02/16/1994

3a. Date of Last Report

03/20/1995

4. FEI Number

65-0469175

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

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 607.1508, 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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
WEEKS, KEVIN S
STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

1.1 TITLE ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

1.2 NAME ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

1.3 STREET ADDRESS ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

2.1 TITLE ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

2.2 NAME ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

2.3 STREET ADDRESS ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

3.1 TITLE ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

3.2 NAME ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

3.3 STREET ADDRESS ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

4.1 TITLE ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

4.2 NAME ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

4.3 STREET ADDRESS ☐ Change ☐ Addition

NAME ☐ DELETE

STREET ADDRESS 9470 S MILITARY TRL 1C
CITY-ST-ZIP BOYNTON BEACH FL 33436

4.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-96

Date

Day/Even Phone #

CR2E034 (12/95)