

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 24 PM 4:24

DOCUMENT # P94000017588 (2)

1. Corporation Name

KENNETH E. TRIMM TRUCKING, INC.

Principal Place of Business

6421 SW 4 PL
MARGATE FL 33068

Mailing Address

6421 SW 4 PL
MARGATE FL 33068

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FID Number

65-0478014

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaigns/Proposing

\$5.00 May Be

Added to Fees

Trust Fund Contribution

☐

8. This corporation is subject to the anti-bribe law under 25-109(1),

Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

TRIMM, BLANCHE A

6421 SW 4 PL

MARGATE FL 33068

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85

Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of person or persons of registered agent and their approval)

(Signature of Registered Agent or person requesting change of filing)

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	TRIMM, BLANCHE A
STREET ADDRESS	6421 SW 4 PL
CITY, ST, ZIP	MARGATE FL 33068
TITLE	PD
NAME	KENNETH E. TRIMM
STREET ADDRESS	6421 SW 4 PLACE
CITY, ST, ZIP	MARGATE FL 33068
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	PD KENNETH E. TRIMM
2.3 STREET ADDRESS	6421 SW 4 PLACE
2.4 CITY, ST, ZIP	MARGATE FL 33068
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

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 607.1508, 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 manager or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Blanche Trimm*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BLANCHE TRIMM

2-14-95

(305)

974-4284