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PROFIT CORPORATION ANNUAL REPORT



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

1996

J.V. TRANSPORT INC.						) HARLINGER VIOLENIUM GEGINT G	<b>18</b> 110 <b>18</b> 111 <b>18</b> 11	<b>1</b>    <b>19</b>   †  <b>  6</b>	<b>6</b> 111 <b>7 (</b> 5111) <b>8</b> 1311 (58 6	
Principal Place	of Business		ailing Address							
462 EAST 39TH ST. HIALEAH FL 33013			462 EAST 39TH ST. HIALEAH FL 33013							
			,				3. Date Incorporated or Qualified 03/22/1994	<b>3a</b> . Dat	e of Last R 03/09/1	995
2. Principal Place of Business Suite, Apt. #, etc.		2a. 26	Suite, Apt. #, etc.				4. FEI Number 65-0464 180	Applied Not App		Applied For Not Applicable
							5. Certificate of Status Desired			75 Additional
City & State		27	City & State				& Floating Campaign Financing			Required
3		28	Oity & State				6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip	Country		Zip	Cou	ntry		8. This corporation has liability for	intangible t	ax under s	199.032,
<u>L</u>	25	29	·	30	····-		I	s □No		
	9. Name and Address of Curre	ent Hegis	tered Agent		81	Name	10. Name and Address of New	Registered	Agent	
VALDE	EQ MADIA T						757 53 Face Million Co. Black Assessed	E1.3		
VALDES, MARIA T 462 EAST 39TH ST.					82	Street Addre	ess (P.Ö. Box Number is Not Acceptable)			
	AH FL 33013				83		A STATE OF THE STA			
				i	84	City			85 Zı	o Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t						<del>.</del>		FL	<u>-                                    </u>	
or register familiar wit - IGNATURE	ed agent, or both, in the State of Ho th, and accept the obligations of, Soc Signature typed or printed name of registered age						d of directors. I hereby accept the app	DATE		
2.	OFFICERS A			<b>T</b> 13.			ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
ITLE	PD		DELETE	1 11)	PLE					
AME			_						Change	Addition
	VALDES, MARIA T		_	1.2 NA					Change	☐ Addition
	462 EAST 39TH STREET		_	1.3 \$1	RELTA	DDHESS			Change	∐ Addition
CITY-ST-ZIP				1.3 S ( 1.4 C)	RELT AL					<u> </u>
iTY+ST-ZIP ITLE	462 EAST 39TH STREET	<u></u>	☐ DELETE	1.3 S ( 1.4 C) 2 1 T (	RELT AL TY-ST- ITLE				Change	Addition
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CITY-ST-ZIP  ITLE  LAME  STREET ADDRESS	462 EAST 39TH STREET			1.3 ST 1.4 CF 2 1 TF 2 2 NA 2 3 ST	REET AL 14-S1- ITLE AME	Z <sub>1</sub> P DDRESS	- <u></u>			<u> </u>
ITY-ST-ZIP  ITLE  IAME  TREET ADDRESS  ITY-ST-ZIP	462 EAST 39TH STREET			1.3 ST 1.4 CF 2 1 TF 2 2 NA 2 3 ST	RELT AT TY-ST- ITLE AME TREET AT	Z <sub>1</sub> P DDRESS				<u> </u>
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STREET ADDRESS CITY-ST-ZIP UITLE NAME STREET ADDRESS CITY-ST-ZIP	462 EAST 39TH STREET		DELETE  DELETE	1.3 S I 1.4 C I 2.1 T I 2.2 N A 2.3 S I 2.4 C I 3.1 T I 3.2 N A 3.3 S I 4.4 C I 4.3 S I 4.4 C I 5.1 T II 5.2 N A 5.3 S I 5.4 C I 6.1 T II 6.2 N A 6.3 S I 6.3 S I	HELL ALL  TY-SI-  TILE  AME  THEFT ALL  TY-SI-  TILE  AME  THEFT ALL  TY-SI-  TILE  THEFT ALL  TY-SI-  TILE  TY-SI-  TILE  TY-SI-  TILE  TY-SI-  TILE  TY-SI-  TILE  TY-SI-  TILE  TY-  TY-  TY-  TY-  TY-  TY-  TY-  TY	ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS			☐ Change ☐ Change ☐ Change	Addition  Addition  Addition

county that the minormation indicated on this arrition report of supprendent arrition report is true and according and that my signature shall have the same legal effect as it 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 Dlock 13 of changed, or on an attachingor with an address. GLACIA TORRE LISTA . MARIA TERESA VALDES. 3-20-96 3656931188

SIGNATURE: 4