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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| 1. Corporation | MENT # P940 OR MOTOR EXPRESS, IN | 00024153 (i | 6) | | 1 (4 5 11 5 6) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | IZ MALIJI MALIJA NICIJI MJANI | /1001 0 1100 (112 100) |
|--------------------------------------|--|--------------------------------------|-------------------------|---|--|---|-------------------------------------|
| Para tarak pa | | ····· | , | | | | |
| Principal Place of Business | | Mailing Address | | | | 31901 01104 1111 1001 | |
| 2298 SLOOP CT MIDDLEBURG FL 32068 | | 2298 SLOOP CT MIDDLEBURG FL 32068 | | | | | |
| | | | | | Date Incorporated or Qualified 03/24/1994 | 3a. Date of Last 05/01/ | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | 1 00,01, | Applied For | |
| 21 | | 26 | - | | 59-3235272 | - | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | 5 Additional | |
| City & State | | City & State | | | Fee | e Required | |
| 23 | | 28 | | Election Campaign Financing Trust Fund Contribution | | 00 May Be | |
| Zip | Country | Zip | Country | | | A00 | ed to Fees |
| 25 | | 29 | 30 | | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No | | |
| | 9. Name and Address of Curr | ent Registered Agent | | | 10. Name and Address of New Re | egistered Agent | |
| TAM 0 | | | 81 | Name | | | |
| | R, TOMMY M Loop Ct | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable | e) | |
| | BURG FL 32068 | | 83 | | | | |
| MIDDLE | .00NG FL 32000 | | 63 | | | | |
| | | | 84 | City | | FL 85 2 | Zip Code |
| familiar with | h, and accept the obligations of, Se Signature, typed or printed name of registered age | ction 607.0505, Florida Statutes | red by the corpo | oration's boa | oration submits this statement for the purp and of directors. Thereby accept the appo and when renstating) | pose of changing its intment as registere | registered office ed agent. I am |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | | |
| NAME | TAYLOR, TOMMY M | DELETE | 1. 1 TITLE | | | Change | Addition |
| STREET ADDRESS | 2298 SLOOP COURT | 1.2 NAME 1.3 STREET ADDRES | | ADDOCCO | | | |
| CITY-ST-ZIP | MIDDLEBURG FL | | 1.4 CITY - S | | | - | |
| TITLE | V | DELETE 2. | | | | Change | ☐ Addition |
| NAME | TAYLOR, ALICE E | | 2.2 NAME | | | onange | |
| STREET ADDRESS | 15561 BREAM RD | | 23 STREET | ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL | | 2 4 CITY - \$ | 1-ZIP | | | |
| TITLE | ST STANGE | DELETE 3 | | S | T | XX Change | Addition |
| NAME OTREET LEBOSES | DEAL, FRANCIS M | | 3 2 NAME | | AYLOR, FRANCES M. | | |
| STREET ADDRESS CITY - ST - ZIP | 2298 SLOOP COURT MIDDLEBURG FL | | 3.3. STREET | | 298 SLOOP COURT | | |
| TITLE | INDULTORIO I L | FT berete | | -ZIP M | IDDLEBURG, FL | FIX | |
| NAME | | | 4. 1 TITLE 4.2 NAME | ļ | | Change | Addition |
| STREET ADDRESS | | | 4.2 NAME 4.3 STREET. | 4DODECC | | | |
| CITY-SI-712 | | | 4.4 CITY-ST | | | | |
| TITLE | ☐ DELETE | | 5 1 TITLE | | | Change | Addition |
| NAME | | | 5.2 NAME | | · · · · · · · · · · · · · · · · · · · | | |
| STREET ADDRESS | | | 53 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | 54C | | - ZiP | | | |
| TITLE NAME | | DELETE 6 1 | | ĺ | | ☐ Change | Addition |
| NAME STREET ADDRESS | | | 6 2 NAME | | • | | |
| 1 | | | 6.3 STREET / | 1 | | | |
| 14. I do hereby | certify that the information supplied | with this filma is voluntarily furn | ished and done | not qualify for | or the exemption stated in Section 1100 | 7/2/4A F(=22: 0) : | 400) (() |
| oath: that I | | oration or the receiver or truster | uai report is true | not qualify for | or the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flor | | |

SIGNATURE: Tommy M. Taylor (904)264-3866

SIGNATURE AND TYPED OR PRINGED NAME OF SIGNING OFFICER OR DIRECTOR

Tommy M. Taylor

Date (904)264-3866

Digitals Phone of Signing Officer or Director