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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 · DOCUMENT # P9400034546 (9)

Solid	1. Corporation Name AUTO EXPRESS TRANSPORT, INC.  Principal Place of Business 6813 ARMAND DR TAMPA FL 33634  Mailing Address 6813 ARMAND DR TAMPA FL 33634  TAMPA FL 33634					
2. Preside Proce of Business   2. Au Mailing Address   4. FET Number   1. Applies   1. Applies   2. Applies						
Since, Apil #, etc.  27  City & State  City	2, Principal	Prace of Business	28. Mailing Address		4, FEI Number	Applied For
City & State   City & City & State   City & City & State   City & City & State   City & State   City & State   City & State   City &		A		<del></del>	59-3234090	Not Applicable
City & State    City & State   City & State   City & State   City & State   Country   Zip   Zi		⊢#, €IC	<del></del>		5. Certificate of Status Desired	\$6.75 Additional Fee Required
24		de		<u> </u>	6. Election Campaign Financing	\$5.00 May Be
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Street Address (P.O. Box Number is Not Acceptable)  13. Pursuant to the previouris of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of charging its reflected 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 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 or both, in the State of Florida Statutes.  SIGNATURE  12. OF FICETRS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TAMPA. FL. 12 NAME  SIGNATURE  12. OF FICETRS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TAMPA. FL. 12 NAME  14. City ST. 2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TAMPA. FL. 14. City ST. 2P  15. VASQUEZ, ANGEL  831 ARMAND DR  15. STREET ADDRESS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TAMPA. FL. 14. City ST. 2P  16. Change  17. Change  18. City ST. 2P  19. Change  19	23					
ALESSANDRI, PETER \$121 EHRLICH RD 106B TAMPA FL 33824  182 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuret to the previous of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list redit or 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 or both, an the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or both, an the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OF FICETRS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 181.  PT	,	<u>}</u> ¬	<b>├</b> ─ <b>┐</b> `	<u>}</u>	· · · · · · · ·	
ALESSANDRI, PETER 5121 EHRLICH RD 1068 TAMPA FL 33624  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 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 and accept the objective of biophonous of scotion 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to mit and accept the objective objective of socion 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to mit and accept the objective objective objective objective of socion 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to the purpose of changing its register and accept the objective objec	24					
ALESSANDIA, FETER  \$121 EHRILCH RD 106B TAMPA FL 33624    B2	A1 F		on negletored Agent	81 Name	10. Teamle three Address of from Flograt	olea Agent
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 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 a market with and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE Change Cha				83	dress (P.O. Box number is not Acceptable)	85 Zip Code
DELETE						
NAME	12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
STREET ADDRESS   CHY-ST-ZIP   TAMPA FL	1ilt.F		DELETE	1.1 TITLE		☐ Change ☐ Addition
TAMPA FL				1		
DELETE						
NAME   STREET ADDRESS   SARMAND DRIVE   CHANGE   STREET ADDRESS   CHY-ST-ZIP   TAMPA FL   Change   C			T DELETE			Change Addition
STREET ADDRESS   6813 ARMAND DRIVE   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP		(	buil secore	<b>6</b> (		Find a transfer
DELETE   DELETE   3.1 TITLE   Change   NAME   STREET ADDRESS   STREET AD	STREET ADDRESS			2.3 STREET ADDRESS		
NAME	C-TY - S1 - ZiP	TAMPA FL		2. 4 CITY-ST-ZIP		
3.3 STREET ADDRESS   3.4 CITY - ST - ZIP	1611		DELETE	3 1 TITLE		Change Addition
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NAME         4, 2 NAME           STREET ADDRESS         4.3 STREET ADDRESS           CHY-SI-ZF         4.4 CHY-SI-ZIP           DILF         DELETE         51 TITLE         Change           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS			DELETE			Change Addition
A3 STREET ADDRESS   A4 CITY-ST-ZIP   THE   Change   STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S4 CITY-ST-ZIP   S7 CITY S STREET ADDRESS   S4 CITY-ST-ZIP   S7 CITY S STREET ADDRESS			ting Deaters			
City - ST - ZF				<b>1</b>		
NAME STREET ADDRESS 5.3 STREET ADDRESS						
STREET ADDRESS 5.3 STREET ADDRESS	DILE		DELETE	******		Change Addition
	NAME			5.2 NAME		
	STREET ADDRESS			5.3 STREET ADDRESS		
······································	CHY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition

14. I do hereby 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 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 of 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 12 or Block 13 if changed or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

TURE AND TWEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/97

Daytime Phone #

**FILED** 

Apr 04 1997 8:00am

Secretary of State