

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

DOCUMENT # P94000063988 (7)

1. Corporation Name

TAMPA BAY TRANSPORT, INC.



Principal Place of Business

1700 D HERCULES  
CLEARWATER FL 34625  
US

Mailing Address

1700 N HERCULES  
CLEARWATER FL 34625  
US

3. Date Incorporated or Qualified  
08/26/1994

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

4. FEI Number

59-3265302

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

9. Name and Address of Current Registered Agent

WARADY, WILLIAM  
3233 OAKWOOD PLACE  
TARPON SPRINGS FL 34689

10. Name and Address of New Registered Agent

81 Name

KIMBERLY WARADY

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

3233 OAKWOOD PL.

83

84 City

TARPON SPRINGS

FL

85 Zip Code

34689

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

Kimberly Warady

Kimberly Warady

PRESIDENT

4/29/96

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME D BENJAMIN, ALBERT  
STREET ADDRESS 2140 MURFIELD WAY  
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☐ DELETE  
NAME D BENJAMIN, MILDRED  
STREET ADDRESS 2140 MURFIELD WAY  
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☒ DELETE  
NAME P WARADY, WILLIAM  
STREET ADDRESS 3233 OAKWOOD PLACE  
CITY-ST-ZIP TARPON SPRINGS FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition  
1.2 NAME KIMBERLY WARADY  
1.3 STREET ADDRESS 3233 OAKWOOD PL.  
1.4 CITY-ST-ZIP TARPON SPRINGS, FL. 34689

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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 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:

Kimberly Warady

Kimberly Warady

4/29/96

813-447-3573

(Signature typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (12/95)