**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # P94000092295

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

DIVISION OF CORPORATIONS

## Secretary of State

## **FILED** Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90014 038 \*\*\*150.00

L&JTF	RANSPORT INC.					
Principal Place	e of Business	Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
P.O. BOX 772016  CORAL SPRINGS FL 33077  US  P.O. BOX 772016  CORAL SPRINGS FL 33077  US				DO NOT WRITE	IN THIS SPACE	
03		03		3. Date Incorporated or Qualifed	<u> </u>	
				12/19/1994		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Ap	plied For
21		26		65-0542890	. No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	□ \$8.75 A Fee Re	
City & Stat	e'	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country	8. This corporation owes the current	<u> </u>	
24	25	29 30	<u> </u>	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Re		
HAG	ER, HENRY			HENRY L. HAGE		
3281 CORAL HILLS DR.			82 Street	Address (P.O. Box Number is Not Acceptable 5 & RIVERSIDE D	P ADT	3-1)
CORAL SPRIGNS FL 33065			93	•	<u>. , , , ,</u>	
				RSIDE ESTATES		
				ORAL SPRINGS	(FL/ 133	065
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with and accept the obliga	of Florida. Such change was auth	torized by the corpo	corporation submits this statement for the proporation's board of directors. I hereby accept	the appointment as re	gistered
SIGNATURE	Signature, typed or printed page of registered ager	nt and title Oplicable. (NOTE: Re	egistered Agent signature r	equired when reinstation)	DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	RS IN 12
TITLE	PVPT	☐ DELETE	1.1 TITLE	PVPT , MALES	Change	Addition
NAME	HAGER, HENRY L		1.2 NAME	HENRY L. HAGER 3058 RIVERSIDE DR CORAL SPRINGS FO	40520	ì
STREET ADDRESS	AAAA GODAL LIILL DOUE		1.3 STREET ADDRESS	3058 RIVERSIDE DI	1 2221	i
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1 4 CITY-ST-ZIP	CORAL SPRINGS FO	1. 33065	
TITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME		,	ì
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE -		— DELETE	3.1 TITLE			Addition
NAME			3.2 NAME			}
STREET ADDRESS			3.3 STREET ADDRESS		•	
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP	•	☐ Change	Addition
TITLE		☐ pereie	4.1 TITLE			
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CiTY-ST-ZiP 5.1 TITLE		☐ Change	Addition
TITLE		C1 occess	5.2 NAME			_
NAME			5.3 STREET ADDRESS		,	}
STREET ADDRESS			5.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME		<del></del> :	6.2 NAME		<del>.</del>	}
STREET ADDRESS	1		6.3 STREET ADDRESS			1

14. I 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

954 345-0243