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May 13, 1999 8:00 am
Secretary of State

05-13-1999 90005 026 ***150.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT
 CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # **P94066092532 ✓**

1. Corporation Name
Fast Transportation Services of Miami



Principal Place of Business
 3405A NW 72 Ave.
 Suite 203
 Miami, FL 33122

Mailing Address
 P.O. Box 620543
 Orlando, FL 32862

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24 Zip Country

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 Zip Country

3. Date Incorporated or Qualified
December 1994

4. FEI Number
65-0545590

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 owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
John Jordan

10. Name and Address of New Registered Agent
 81 Name **John Jordan**
 82 Street Address (P.O. Box Number is Not Acceptable)
1902 Cypress Lake Dr. #200
 83
 84 City **Orlando** **FL** 85 Zip Code **32837**

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 **JOHN JORDAN / Director** **6/01/99**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	Director	
NAME	John Jordan	
STREET ADDRESS	1902 Cypress Lake Dr. #200	
CITY-ST-ZIP	Orlando, FL 32837	
TITLE	President	
NAME	Robert Groppe	
STREET ADDRESS	One Air Cargo Place, Unit 1	
CITY-ST-ZIP	Melbourne, FL 32901	
TITLE	Vice President	
NAME	Maurice Forelle	
STREET ADDRESS	3405A N.W. 72nd Ave.	
CITY-ST-ZIP	Miami, FL 33122	
TITLE	Secretary/Treasurer	
NAME	Robert Botero	
STREET ADDRESS	3405A N.W. 72nd Ave.	
CITY-ST-ZIP	Miami, FL 33122	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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.

SIGNATURE: **JOHN JORDAN / Director** **4/27/99** **4074385499**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)