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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000093141 (7)

KIRK TRUCKING & ESCORT, INC.

Principal Place of Business Mailing Address 119 RIVER SHORE DR 119 RIVER SHORE DR SAN MATEO FL 32187 SAN MATEO FL 32187-8760 3a. Date of Last Report 3. Date Incorporated or Qualified 12/23/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3283109 21 26 Not Applicable Saite Act # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Added to Fees Trust Fund Contribution Country Country This corporation has liability for intangible tax under s. 199.032, 24 Yes INo 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KIRK. MYRTLE L Name 119 RIVER SHORE DR **B2** Street Address (P.O. Box Number is Not Acceptable) SAN MATEO FL 32187 83 84 Zip Code 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. Familiar with land accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Supervise: Syncit or paint of name of registeric agent and ties if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. THIE DELETE Change \_\_\_ Addition 1.1 TITLE KIRK, RUBEN NAME 1.2 NAME 119 RIVER SHORE DRIVE STEEL LAFORESS 1.3 STREET ADDRESS SAN MATEO FL CHTY-ST ZIE 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 2.1 TITLE KIRK, MYRTLE L NAME 2.2 NAME 119 RIVER SHORE DRIVE STEEFT AUTORESS 2.3 STREET ADDRESS SAN MATEO FL CHY-ST ZE 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS

CiTY+S1+ZIP 6.4 CITY-ST-ZIP 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 Lam an efficer 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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS 5.4 CITY - ST-ZIP

6 3 STREET ADDRESS

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FILED

Mar 27 1997 8:00am

Secretary of State