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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500004174 (5)

SOUTHERN ROADS TRANSPORTATION, INC.

| Principal Place of Business | Mailing Address |
|-----------------------------|-------------------------|
| P.O. BOX 370 | P.O. BOX 370 |
| SAN MATEO FL 32187 | SAN MATEO FL 32187-0370 |

FILED Apr 30 1997 8:00am Secretary of State



| SAN MATEO FL 32187 | | S | SAN MATEO FL 32187-0370 | | | | | | | | |
|----------------------|--------------------|------------------------|-------------------------|---|-----------|---------------------------|---------------|---|---|-------------------------------------|--|
| | | | | | | | | Date Incorporated or Qualified 01/13/1995 | 3a. Date of La | , | |
| | Place of Busin | ess | 2 | a. Mailing Addre | oss | | | 4. FEI Number | 1 | Applied For | |
| 21 | | | 28 | 28 | | | | 59-3298954 Not Applicable | | | |
| Suite, Apt. #, etc. | | | 27 | Suite, Apt. #, etc. 27 | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| 23 | | | | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| Zip 24 | | Country 25 | 29 | | 3 | Country 30 | y | 8. This corporation has liability for Florida Statutes | intangible tax und Yes 🔣 No | er s. 199.032, | |
| | | and Address o | f Current Reg | istered Agent | | | т. | 10. Name and Address of New Re | gistered Agent | | |
| | E, JERRY L | | | | | 81 | Name | | | | |
| | N. BARTRAI | | | | | 82 | Street | Address (P.O. Box Number is Not Acceptate | ole) | | |
| SAN | i mateo fl | 32187 | | | | | | | | | |
| | | | | | | 83 | | | | | |
| | | | | | | 84 | City | | - 85 | Zip Code | |
| | | | | ··· | | | | | FL | • | |
| office of | registered ace | ent, or both, in t | ne State of Flo | 607.1508, Florid rida. Such chand of, Section 607.0 | de was au | ithorized bi | v the con | corporation submits this statement for the poration's board of directors. I hereby accept | ourpose of changir of the appointmen | ng its registered Las registered | |
| SIGNATURE | Signature, typed i | or printed name of rep | gistered agent and ti | it if applicable | (NO1E: | Registered Age | ont signature | required when relinsating) | DATE. | | |
| 12. | | OFFIC | ERS AND DIRI | ECTORS | | 13. | | ADDITIONS/CHANGES TO OFFIC | ERS AND DIREC | TORS IN 12 | |
| TITLE | D | | | D£I | LETE | 1 1 HILE | | | Chan | ge Addition | |
| NAME | COLE, JEF | | | | | 1.2 NAME | | | | | |
| STREET ADDRESS | | rtram trail | • | | | 1.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | SAN MATE | O FL 32187 | · | | | 1.4 CITY - S | S1 - ZIP | | | | |
| TITLE | D | | | ☐ DEI | LFTE | 2.1 1111.6 | | | Chan | ge Addition | |
| NAME | COLE, ALI | | | | | 2.2 NAME | | | | | |
| STREET ADDRESS | | RTRAM TRAIL | , | | | 2.3 STREET | I ADDRESS | | | | |
| CITY-ST-ZIP | SAN MATE | O FL 32187 | | | | 2. 4 CITY- | S1-ZIP | | | | |
| TITLE | | | | DE OFF | .ŧ IŁ | 3.11111.5 | | | L Chan | ge L Addition | |
| NAME | | | | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | | | | 3.3 STREET | | | | | |
| CITY-ST-ZIP TITLE | | | | DE | CTC . | 3.4 CHY- | ST-ZIP | | | | |
| NAME | | | | | CIC | 4.1 TITLE | İ | | L Chan | ge L Addition | |
| STREET ADDRESS | | | | | | 4.2 NAME | | | | | |
| CITY-ST-ZIP | | | • | | | 4 3 STREET | | | | | |
| TITLE | | | | [] DEI | FIF | 4.4 CITY - S 5.1 TITLE | 51 - 2117 | | Chan | ae Addition | |
| NAME | | | | | | 52 NAME | Ì | | LI CIMII | gv <u> </u> | |
| STREET ADDRESS | | | | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | | | | | | |
| TITLE | | | | DEL | ETÉ | 5.4 CrtY - S 6.1 THLF | 01-711. | | Chan | ge Addition | |
| NAME | | | | | | 6.2 NAME | | | ر الهاا | Ao El Voncoqu | |
| STREET ADDRESS | | | | | | 6.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | 6.4 CHY-S | | | | | |
| | | | | | | — 0.4 DH 1 1 3 | 7 411 | | | | |

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 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 or any attachment with an address.

CIONATURE (1/2 //// Cala Block M // / /