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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000011236 (3)

EXPRESS FREIGHT & TRUCKING, INC.

Principal Place of Business

Mailing Address



	ROYALE BLVD #623 DALE FL 33308	3101 PORT ROYALE B FT LAUDERDALE FL 3								
					3. Date Incorporated of 02/06/1995	r Qualified	3a. Date c	of Last F	Report	
2. Principal Pla 21 201	ace of Business	2a. Mailing Address 26 2011 N	15 3	3 ⁸⁰ 5T	4. FEI Number	1-82	14	j	Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							Not Applicable 5 Additional	
22		27			5. Certificate of Status	· · · · · · · · · · · · · · · · · · ·		Fee	Required	
23 City & State	4. P	28 V. H. P			6. Election Campaign I Trust Fund Contribu				00 May Be ed to Fees	
24 3306	4 25 BROWARD	29 33064	30 Count	ROWARD	8. This corporation has Florida Statutes	liability for int		under s	199.032,	
	9. Name and Address of Curren	t Registered Agent		-T ::	10. Name and Addres	s of New Re	gistered Aç	jent		
COMME	II INOMES		8	1 Name						
CONNELL, MICHAEL 3101 PORT ROYALE BLVD #623			8:	2 Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
	DERDALE FL 33308		8:	3						
			8	4 Gity	**************************************		FL	85 Z	ip Code	
11. Pursuant t	o the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the above	I named corooral	tion submits this statemen	t for the num		Lino its	registered office	
Or registers	ed agent, or both, in the State of Florid th, and accept the obligations of, Secti	ia. Such change was aumon ze	ea by the cor	poration's board	of directors. I hereby acc	ept the appoir	ntment as re	gistered	d agent. I am	
SIGNATURE										
	Signature, typed or printed name of registered agent i			ent signature required v	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		DATE			
12. Title	OFFICERS AND	DELETE	13.		ADDITIONS/CHANG	ES 10 OFFIC				
NAME.	CONNELL, MICHAEL						니	Change	Addition	
STREET ADDRESS	AAA DODE BOULLE BULB HAAA									
CITY-ST-ZIP	FT LAUDERDALE FL 33308	1.4 CITY-								
TITLE										
NAME		DELETE.	2 1 INLE					Change	Addition	
STREET ADDRESS		☐ DELETE.	2 1 111LE 2.2 NAME					Change	Addition	
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To refer of the exemption supplied with true, thing 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 comparation for 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 chapted, you an utilize ment with an address.

SIGNATURE:

OF URE AND TYPED OR PRINTED NAME OF SUMMING OFFICER OR DIRECTOR

14/29/96 (3x) 788 -4146