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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000021299	(9)
Corneration Name		

Corporation Name

DOUBLE T TRUCKING, INC.



Principal Place o	of Business	Mailing Address								
23274 MOOREHEAD AVE		23274 MOOREHEAD A								
PT CHARLOTT	TE FL 33954	PT CHARLOTTE FL 83	1904			3. Date Incorporated or Qualified 03/09/1995	3a. Date	of Last F	Report	
2. Principal Plac	ce of Business	2a. Mailing Address				4. FLI Number	100		Applied For	
1		26	····			65-0578	128		Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Dosired			5 Additional Required	
22		27				6. Election Campaign Financing				
City & State		City & State				Trust Fund Contribution		Added to Fees		
3	Country	Zip	Col	untry		8. This corporation has liability fo	r intangible tax	under s	199.032,	
Zip ::71	Country 25	29	30			Florida Statutes	s ∐No			
24	9. Name and Address of Current			Ţ		10. Name and Address of New	Registered A	gent		
				81	Name					
DINDYAL	L, SEODIAL T			82	Street Add	ress (P.O. Box Number is Not Accepta	able)			
23274 M	OOREHEAD AVE						_,			
	RLOTTE FL 33954			83						
				84	City			85 2	?ip Code	
	o the provisions of Sections 607,0502			i I	•		FL	1, 1,		
SIGNATURE _	Signature, lifted or printed nanic of registered agon. OFFICERS AND	D DIRECTORS	13.	-	t signature requir	ADDITIONS/CHANGES TO OF		DIRECT 1 Change		
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NAME	DINDYAL, SEODIAL T			NAME						
STREET ADDRESS	23274 MOOREHEAD AVE				ADDRESS					
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TITLE			1	NAME		Dinaval Kowsilla	IYENC			
NAME					ADDRESS	23274 Moorehead A	ve			
STREET ADDRESS				CITY-S	iT - ZIP	Dindyal Kowsilla 23274 Moorehad A Pt. Challotte Fl: 33	954			
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NAME			3.2	NAME						
STREET ADDRESS			3.3.	STREE	T ADDRESS					
City - ST - 7IP				CITY-S	31 · 7 P			7 Chang	e 🔲 Additio	
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NAME				NAME	Appress					
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NAME			6.2	NAME						
STREET ADDRESS			6.3	3 STREE	ADDRESS					
ONLY OF THE			6.4	4 CITY-	ST - ZIP					

14. I do hereby certify that the information supplied with this fring 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 path; that I am an officer or director of the corporation or the receiver or trusted 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.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylimo Phone ≇

CR2E034 (12/95)