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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 24 1997 8:00am Secretary of State

DOCUMENT #	P950000226

R. HIGGINS TRUCKING, INC.

Principal Flace of Business Mailing Address 4313 SE BAYSHORE TERRACE 4313 SE BAYSHORE TERRACE STUART FL 34997 STUART FL 34997-6901					
				3. Date Incorporated or Qualified 03/20/1995	3a. Date of Last Report 04/16/1996
	use of Businesis	2a. Mailing Address		4. FEI Number 65-0570962	Applied For
21] Suite, Apt - 22	# _i e [t	26 Suite, Apl. #, etc. 27		5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required
City & Stab	. <u>.</u>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζη) 24	(Country 25]	Ζφ [29]	Gountry 30	7 107 104 010 104 0	X Yes No
	9, Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
	GINS, RICHARD 3 SE BAYSHORE TERRACE				
	ART FL 34997		82 Street	Address (P.O. Box Number is Not Accepta	ble)
010	FULL DESCRIPTION		83		
			64 (0)		85 Zip Code
			84 City		FL 85 Zip Code
agent La SIGNATURI 12.	re familiar with, and accept the oblig	gations of, Section 607.0505, F	authorized by the corlorida Statutes ITE Begistered Agent signature 13.	poration's board of directors. I hereby acce e required when reinstating! ADDITIONS/CHANGES TO OFFI	EATE
10.1	PSTD	DELETE	1.1 Till F	NEDITIONS/OFFMACES TO STYL	Change Addition
NAME	HIGGINS, RICHARD		1.2 NAME		
S RELEADER (*)	4313 SE BAYSHORE TERRAC	Œ	1.3 STREET ADDRESS		
CHY 51-299	STUART FL 34997		1.4 CITY-S1 - ZIP		
111.3		☐ DEL€TE	2.1 TITLE		Change Addition
N/W			2.2 NAME		•
STREET ADDRESS.			2.3 STREET ADDRESS		
Cdv_SEZII; Tibe		DETETE	2 4 CHY-SI-ZIP 3.1 TIJLE		Change Addition
NW			3.2 NAME		
STOLET ADD to a			3.3 STREET ADDRESS		
UN STOP			3.4. CHY-ST-ZIP		
11.11	' '"	DELETE	4.1 TITLE		Change Addit on
N5Ms			4. 2 NAME		
SARIA : ADDOS 16			4.3 STREET ADDRESS	j	
		DELFTE	4.4 CITY - ST - ZIP		Change Addition
TI U			5.1 TITLE 5.2 NAME		La Grange La Adunon
NAME STRUCT ACTORIES			5.3 STREET ADDRESS	:	
Oli St. At			5.4 CITY - ST - ZIP		
IMITE STATE		DELFTE	6 1 TILLE		Change Addition
NAM			6.2 NAME		
Special relations			63 STREET ADDRESS		
OUT 51 ZII			64 CITY - ST - ZIP		
	by certify that the information supplied	ed with this filing does not qua	lify for the exemption	stated in Section 119.07(3)(i), Florida Statut	es. I further certify that the

14. The hearing certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(p). Florida Statutes. I further certify that the information in the arms all report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, the Laman 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 85 dx 12 or Block 13 d chapter 6, or on an attachment with an address.

SIGNATURE

CLAND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR HILL (1905) DUTCH DOUBLE OF SIGNING OFFICER OR DIRECTOR