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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P95000029341 (1)

TRUCKING CO.

PANASOFFKEE LEASING, INC.

FILED Feb 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										1 (80)		I BANIA B a iah	DEN DU					
2501 W. MAIN ST. PO BOX 6									ļ									
	JITE 108				COLEMAN FL 33521													
LEESBURG FL 34748										DO NOT WRITE IN THIS SPACE								
									3.		corporate	ed or Qu	alified					
_	D: 1 15										<u>1/1995 </u>							
2. Principal Place of Business				<u> </u>	2a. Mailing Address					4. FEI Number					L	Ar	plied Fo	\Box
21	Outro Anna III ann			26						59-3313650						Not Applicable		
Suite, Apt. #, etc.					Suito, Apt. #, etc.					Certific	ate of Sta	itus Desi	red				Additiona	đ ļ
City & State					City B Code										F	ee Re	quired	
$\overline{}$	City & Stat	2 State			City & State				6.		n Campai	-	cing	_			May Be	ļ
23	710	·	Country		Zip Country						und Cont			L			o Fees	
$\overline{}$	Zip		Country	Ζιρ	⊢				8.		This corporation owes or has paid the currer					<i></i> `		
24			25	29 	29 30 30 Begintered Agent					Personal Property Tax due June 30. No 10. Name and Address of New Registered Agent								
					81	Name	10.	Name	and Add	ess of h	ew Hei	Jisterec	Agent			\dashv		
		GOIE BRO	CK				١.,	Haille										l
1501 W MAIN								Street	Address (F	dress (P.O. Box Number is Not Acceptable)								
108																		
LEESBURG FL 34748																		
•								City						85	Zip (Code		
			,					•						Fl	-	•		
11.	Pursuant office or r	to the provisi registered ag	ions of Sections 60 ient, or both, in the	7.0502 and 607.15 State of Florida, St	08, Florida Statut uch change was	les, the ab authorized	ove	-named the corr	corporation or a corporation of the corporation of	n submi	ts this sta directors	tement fo	or the pr	urpose of the an	of chang	ging it:	s registere	red
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													, docop	t ino up	pommi		109,515,6	.
SIG	SNATURE																	
Signature: typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS						OTE Registered Agent signature requ						1000 00		DATE				
12.				S DELETÉ	13.			D_{-}	ADDITIC	NS/CHAN	VIGES TO	OFFIC	ERS AN	D DIRE		S IN 12		
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14. I 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 on an attachment with an address.