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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

P95000038862 (5)

DOCUMENT # P9500

RINDERKNECHT TRUCKING, INC.

Principal Place of Business

Mailing Address

FILED Mar 03 1998 8:00am Secretary of State



481 E. RIVIER INDIALANTIC	RA BLVD. FL 32903-4003	481 E. RIVIERA BLVD. INDIALANTIC FL 32903-4003						
					DO NOT WRITE IN TH	IS SPACE		
					3. Date Incorporated or Qualified 05/15/1995		İ	
2. Principal Pl	ace of Business	2a. Mailing Address	0		4 FEI Number	Ap	plied For	
al 277	N. BABCOCK ST	26 277 N. L	BABCO	ck ST	59-3313338		t Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Re	I	
City & State		City & State	-6	•	6. Etection Campaign Financing	\$5.00	•	
	BOURNE 12	28 MERBOURN			Trust Fund Contribution	Added to		
∵ ^{Zip} 329	Country	Zip 33535 2	Country		 This corporation owes or has paid the Personal Property Tax due June 30. 		angibie] No	
24 327 25 29 38 30 30 29 Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
M DIA	NDERKNECHT, WARREN J		81	Name				
ANA E CHAPOL OLUD				Chroni A de	drage (D.O. Boy Mymber in Not Appentable)			
INDIALANTIC FL 32903-4003			82 Street Address (P.O. Box Number is Not Acceptable)					
INDIPERITO TE DEDUC 4000					ja			
			84			es 7in (^oode	
				City N	PERBOURNE F	:L °° 3/2	<i>S35</i>	
Dispusal to the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above pamed corporation submits this statement for the purpose of changing its registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE		ALOTE E	lanistana dana	l sional us soo	uired when reinstating) DATI			
	Signature, typed or printed name of registered agen OFFICERS AND		13.	ii signatura requ	ADDITIONS/CHANGES TO OFFICERS A		S IN 12	
12.	PS	DELETE	1.1 TITLE	<u> </u>	TODITION OF THE STATE OF THE ST	Change	Addition	
NAME	RINDERKNECHT, WARREN J		1.2 NAME					
STREET ADDRESS	481 E. RIVIERA BLVD.		1.3 STREET A	ADDRESS				
CITY-ST-ZIP	INDIALANTIC FL 32903-4003		1.4 CITY - ST	- ZIP				
TITLE		☐ DELETE	2.1 TITLE		ANGERA RINDERKNOCH 181 E RIVIERA BUD INDIALANTIC, FR 37	Change	Addition	
NAME			2.2 NAME	1	LIMECH KINGERMON	ř J		
STREET ADDRESS			23 STREET	address 🖣	181 6 KIVIEKA BUD	a. D .		
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP	INDIALANTIC, FZ 37	240 3 - 4	@ 3	
TITLE		☐ DELETE	3.1 TITLE		,	Change	L Addition	
NAME		!	3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			1.4499	
TITLE		☐ DELETE	4.1 TITLE			Change	Addition !	
NAME			4. 2 NAME		•		ļ	
STREET ADDRESS			4.3 STREET	- 1				
CITY-ST-ZIP		DECEME	4.4 CITY-ST	T-ZIP		Change	Addition	
TITLE		☐ DELETE	5.1 TITLE			C Ollarige	L Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET A					
CITY-ST-ZIP		DELETE	5.4 CITY-ST	1- ZIP		Change	Addition	
TITLE		C) street	6.2 NAME					
NAME EXPECT ADDRESS			6.3 STREET	ADDRESS				
STREET ADDRESS			6.4 City-St					
14. I hereby o	ertify that the information supplied wit	h this filing does not qualify for t	he exempt	ion stated i	in Section 119.07(3)(i), Florida Statutes. I furthe	r 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.								