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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500053984 (7)

S.O.S. DRIVERS, INC.

	_						
Principal Place of Business			Mailing Address				"
1035 HIGHLAND AVE NE		1	1035 HIGHLAND AVE NE				
LARGO FL 33770			LARGO FL 33770 US				DO NOT WRITE IN THIS SPACE
US		U	15				3. Date Incorporated or Qualified
							07/12/1995
	lace of Business	2a.	Mailing Address	 			4. FEI Number Applied For
21							59-3324465 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22			,				Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			7:-				Trust Fund Contribution Added to Fees
Zip 24	Country		Zip	Counti			8. This corporation owes or has paid the current year Intangible
241	25 9. Name and Address of Curren	29 I Regis	tered Agent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
			iorod rigorii		81	Name	IV. Harro and Address of Hori Hogistorea Agont
	OOK, HOWARD						
1035 HIGHLAND AVE NE LARGO FL 33770				1	32	Street Addre	ess (P.O. Box Number is Not Acceptable)
	NGO FL 33//0			1	33		
					┙		
				1	34	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					ove-	-named corpo	reation submits this statement for the purpose of changing its registered
office or registered agost, 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 language with, and accept the obligations of Seption 607.0505. Florida Statutes.							
•	Alune !		Trull?		Z	PORDA	ARD COOK 4-7-98
SIGNATURE	Signature, typed or printed name of registered age	nt and tille	if applicable (NOT	E Registered	Agen	nt signature required	
12.	OFFICERS AND	D DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDS		☐ DELETE	1.1 TITLE			Change Addition
NAME	GROOMS, DAWN T		1.2 NAME				
STREET ADDRESS 7501 142ND AVE N, #F387			1.3 STRE		EET A	ADORESS	
CITY-ST-ZIP	LARGO FL				1.4 CITY - ST - ZIP		
TITLE	VPT	***		2.1 TITL	E		Change Addition
NAME	ÇOOK, HOWARD			2.2 NAME			
STREET ADDRESS	1035 HIGHLAND AVE NE					ADDRESS	
CITY-ST-ZIP	LARGO FL VP		DELETÉ	2.4 CIT		1-ZIP	Chance Addition
TITLE	<u> </u>		DELCTE.	3.1 TITL			L.] Change L.] Addition
NAME CTRECT ADDRESS	FRANCEK, TIM 7501-142ND AVE NO			3.2 NAM		ADDOCCC	
STREET ADDRESS	LARGO FL					ADDRESS	
CITY-ST-ZIP TITLE	PURO IT		DELETE	3.4. CIT' 4.1 TITL		I-LIP	☐ Change ☐ Addition
NAME				4. 2 NAN			
STREET ADDRESS						ADORESS	•
CITY-ST-ZIP				4.4 CiTY			
TITLE			DELET E	5.1 TITL		6.17	Change Addition
NAME			•	5.2 NAM			
STREET ADDRESS						ADDRESS	` i
CITY-ST-ZIP				5.4 CITY			
TITLE			DELETE	6.1 TITL			Change Addition
NAME				6.2 NAM	E		
CTOFFT ADDRESS						000000	

14. Thereby 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 suppliemental 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 chapter on an attachment with an address.