## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

## DOCUMENT # P95000062417 (7)

JOMAR TRANSPORTATION OF BOYNTON BEACH, INC.								
Principal Place	of Business	Mailing Address	Mailing Address				EBSAF BUILD DIVID	FIRM DIODI IIDII ITDI FOOL
	NGRESS AVENUE STE 17 ACH FL 33426		3300 SO. CONGRESS AVENUE STE 17 BOYNTON BEACH FL 33426					
						3. Date Incorporated or Qualified 08/07/1995	3a. Date o	of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0603	74	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing		\$5.00 May Be		
23		28				Trust Fund Contribution		Added to Fees
Zip	Country	<b>Z</b> ip		untry		8. This corporation has liability for	=	under s 199.032,
24	25	29	30	Ţ			. □No	
	9. Name and Address of Curre	ent Hegistered Agent		81	Name	10. Name and Address of New F	legistered Aç	jent
00074	OTEDIATAL F			Ш				
COSTA, STEPHEN E 3300 SO. CONGRESS AVENUE STE 17				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	N BEACH FL 33426			83				
DOTATO	IN DEMONTE 33420							
				84	City		FL	85 Zip Code
or registere	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo h, and accept the obligations of, Ser	rida. Such change was author	ized by the	ove-n	amed corp ration's bo	voration submits this statement for the pul pard of directors. I hereby accept the app	roose of chan	ging its registered office egistered agent. I am
CICALAZILIESE		·						
	Signali re, typod or printed name of registered age			d Agent	signature reck	ired when reinstating)	DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF		
TITLE	D DELETE			1. 1 TITLE			LJ	Change Addition
NAME :	Costa, Stephen e 3300 so. Congress aven	HIE OTE 47		NAME	- CORP. FOO			
STREET ADDRESS	BOYNTON BEACH FL 3342				ADDRESS			
C/TY-S1-7IP TITLE	BOTHTON BEACH FL 3342	DELETE	2.1	DITY-ST	- ZIP		· ·	Change Addition
NAME				2.2 NAME				Orango Addition
STREET ADDRESS					ADDRESS			
CITY-SI-ZIP				CITY-ST				
TITLE		☐ DELETE		TITLE				Change
NAME			3.2 N	IAME				
STREET ADDRESS			3.3.	STREET	ADDRESS			
CITY-ST-ZIP			3.4 0	CITY-ST	- <b>Z</b> )P			
TITLE		DELETE	4.1	TITLE	[			Change
NAME			4.2 h	IAME				
STREET ADDRESS			4.3 9	STREET A	ADDRESS			
CITY-ST-7IP		Florer		STY-ST	- ZIP			
THLE		☐ DELETE	1	TITLE			IJ	Change
NAME			4	IAME				
STREET ADDRESS			1		ADDRESS			İ
CITY - ST - ZIP		DELETE		OTY-ST	- ZIP			Change [7] Addition
TITLE			1	TITLE				Change Addition
NAME STREET ADDRESS			4	AME TOCCT	IDDD568			
CITY-ST-ZIP				DITY-ST	ADDRESS			1
01111-01-01			■ 0.4 (	/FII - 31	- 410			1

14. I do hereby certify that the information supplied with this filing 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 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 attackiment with an address.

SIGNATURE:

TATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

407-735-3366

R2F034 (12/95)