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

**PROFIT** CORPORATION ANNUAL REPORT 1999



DOCUMENT # **P95000063509**1. Corporation Name CHARBONNEAU BROS. TRANSPORTATION, INC.

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 03, 1999 8:00 am Secretary of State 05-03-1999 90075 039 \*\*\*150.00



Principal Place of Business Mailing Address						- I HOURHOURS HER FOLION WHILE BOTH ORTHER OF		ii adiid (Bii idal
17351 BRADENTON ARCADIA RD P O BOX 373 1YAKKA CITY FL 34251 MYAKKA CITY FL 34251						1		
	7°	•			•	DO NOT WRITE IN TH	113 SPACE	
	• • •					3. Date Incorporated or Qualifed		l
		A Address				08/16/1995 4. FEI Number	<del></del>	applied For
2. Principal Place of Business 2a. Mailing Address							<b>⊢</b> ~⊢	lot Applicable
1 26						59-3343310		Additional
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired	7	Required
City & Sta	-	City & State				6. Election Campaign Financing		) May Be
¬ ' ' ' ' '		28				Trust Fund Contribution		to Fees
3   Zip	Country	Zip	Cou	ntrv		8. This corporation owes the current year		
4	25	29	30	,		Personal Property Tax.	Yes	□No
4	9. Name and Address of Curren		1901	_		10. Name and Address of New Register	ed Agent	
				81	Name			
CHA	ARBONNEAU, JOSEPH A		-			1000		
37351 BRADENTON ARCADIA RD				82	Street Addre	eet Address (P.O. Box Number is Not Acceptable)		
MY/	NKKA CITY FL 34251			83				
de de la Companya de Notas de la Companya				84	City	F		Code
3 - 1 1 1 1 mm	to the security of Continue 607 050	2 and 607 1509 Florido Statut	oe the a	2000	named corno	ration submits this statement for the purpose		ts registered
office or agent, I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a	uthorized	iby t	the corporation	n's board of directors. I hereby accept the ap	pointment as	egistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE	: Registered	Agent	signature required			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
IIILE	P	´ □ DELETE	1.1 TITLE				Change	Addition
VAME	CHARBONNEAU, JOSEPH A		1.2 NAME					
STREET ADDRESS	37351 BRADENTON-ARCADIA RD.		1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	MYAKKA CITY FL 34251		1.4 CITY-		-ZIP			
TITLE	V	☐ DELETE	2.1 TITLE				Change	Addition
NAME	CHARBONNEAU, JOSEPH JR.		2.2 N	ME	1			
STREET ADDRESS	ATTOR STREET CHILADOLDIA	RD.	2.3 \$1	REET	ADDRESS			
CITY-ST-ZIP	MYAKKA CITY FL 34251		2.4 C	TY-S1	r-zip			
TITLE	V	☐ DELETE					Change	☐ Addition
NAME	CHARBONNEAU, CLIFFORD							1
STREET ADDRESS		RD.	3.3 ST	REET	ADDRESS			
CITY-ST-ZIP	MYAKKA CITY FL 34251			TY-SI				*
TITLE	ST	☐ DELETE	4.1 Ti				Change	Addition
NAME	CHARBONNEAU, JEANETTE		4.2 N	AME	ļ			ı
STREET ADDRESS		RD.			ADDRESS			
STREET ADDRESS CITY-ST-ZIP	MYAKKA CITY FL 34251	110.	li i	TY-ST				
TITLE	MITANA ON I IL 04201	☐ DELETE	5.1 T		<del></del>		Change	Addition
NAME	1		5.2 N				- •	
			- 6		ADDRESS			
STREET ADDRESS			1	TY-ST	·			
CITY-ST-ZIP	<del> </del>	☐ DELETE	6.1 TI		<del></del>		Change	e Addition
	Î.		1					
			6.2 N	ME				
NAME STOCKT ANNOCSS	}		6.2 N/ 6.3 S3		ADDRESS			1

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: \_

941-322-2261