FILI	E NOW: FILING FE	E AFTER MAY 1	IS \$2;	25.00			
PROFIT FLORIDA DEPARTI				OF STATE			
ANNL	JAL REPORT	5	dra B. Mortha cretary of Stat		FILE		
1996 DIVISION OF CORPO			OF CORPOR	ATIONS	Apr 26 1996 8:00 am		
DOCUME:NT # P95000087790 (8)				Secretary	of State		
WAY	NE'S TRUCKING, INC.						
Principal Place		Mailing Address			F FWERINES HIN IBIWI WILL WEST WOTT	AAIIE AAIAI EAIII EAAIE IAEIA (AIEI AAIE IAAI	
HOLLYWOO	oln street Od fl	6105 LINCOLN STF HOLLYWOOD FL	reet				
2. Principal Pla	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualified 10/30/1995 4. FEI Number	3a. Date of Last Report	
21		26	h		13-024176	Applied For Not Applicable	
Suite, Apt. : 22	#, elc.	Suite, Apt. #, etc. 27	here and the second sec		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Crty & State 23	3	City & State			6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Ζφ 24	Country 25	Ζψο 29	Cou 30	untry	8. This corporation has liability for int Florida Statutes I Yes	tangible tax under s 199.032,	
	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent	
				PO Rox Number is Not Acceptable			
2117 HOLLYWOOD BLVD.			I				
HULLY	WOOD FL		I	83			
			I	84 City		FL 85 Zip Code	
or registere	ed agent, or both, in the State of H	forida. Such change was author	inzed by the c	ove-named corpor corporation's boa	ration submits this statement for the purpo and of directors. I hereby accept the appoir	ose of changing its registered office ntment as registered agent. I am	
familiar wit SIGNATURE	th, and accept the obligations of, Se	ection 607.0505, Florida Statute	əs.		• • •		
12.	Signature, typed or printed name of registered ag	igent and tills if applicable (N AND DIRECTORS	(NOTE Registered	d Agent signature require			
TITLE	PSD		1.1 T	DTLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
NAME	TOLLEY, WAYNE C		1.2 N/			24	
STREET ADDRESS CITY - ST - ZIP	6105 LINCOLN STREET HOLLYWOOD FL			TREET ADDRESS		02E034	
TITLE	VTD		1.4 C) 2. 1 I)	DTY-ST-ZIP DTLE		Change Addition	
NAME	TOLLEY, NADYNNE E		2 2 N#	AME			
STREET ADDRESS	6105 LINCOLN STREET HOLLYWOOD FL			TREET ADDRESS			
CITY-ST-ZIP TITLE	HULLINUUD IL	DELETE	2.4 Cl 3. 1 Tl	ITY - ST- ZIP		Change Addition	
NAMÉ			3.2 NA				
STREET ADDRESS			f	STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 Cľ 4. 1 Ti	ITY-ST-ZIP		Change Addition	
NAME		haar 1	4.2 NA				
STREFT ADDRESS			4.3 ST	TREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE		ITY-ST-ZIP			
NAME			5. 1 Ti 5.2 NA			🛄 Change 🔲 Addition	
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE NAME		DELETÉ	6. 1 TI 6.2 NA			Change 🗋 Addition	
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP			64 CR	ITY-ST-ZIP			
certity triat	the information indicated on this an	ngual report or supplemental an	nnual report is	s true and accura	or the exemption stated in Section 119.07 ate and that my signature shall have the sa	me legal effect as it made under	
oath; that I am an officer or director of the corporation or the receiver or frustee 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.							
SIGNATURE: APRIL 22 1996 1-800-873-1387							
SIGNAT	SIGNATURE AND TYPED	OR PRINTED NAME OF BROWING OFFIC	CER OR DIRECT	IOR		1-800-0/3-)38'/ Daytime Phone #	