

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

FILED

Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000089012 (5)**

1. Corporation Name
M & S TRUCKING, INC.

Principal Place of Business
**5900 S STATE RD 7
FORT LAUDERDALE FL 33314**

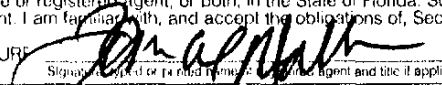
Mailing Address
**5900 S STATE RD 7
FORT LAUDERDALE FL 33314-6423**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/16/1995	3a. Date of Last Report 04/15/1996
21		26		4. FEI Number 59-3361791	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MULLIS, TOM W 5900 S STATE RD 7 FORT LAUDERDALE FL 33314		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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:  DATE: **4-8-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLIS, TOM W	1.2 NAME	
STREET ADDRESS	5900 S STATE RD 7	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33314	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLIS, CHAD	2.2 NAME	
STREET ADDRESS	5900 S STATE RD 7	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33314	2.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHNEIDER, RANDY	3.2 NAME	John Swartz Page
STREET ADDRESS	5900 S STATE RD 7	3.3 STREET ADDRESS	5581 SW 57th St.
CITY-ST-ZIP	FORT LAUDERDALE FL 33314	3.4 CITY-ST-ZIP	Davie FL 33314
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	vp Eddie L. Landon
STREET ADDRESS		4.3 STREET ADDRESS	1939 Cleveland St.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Hollywood FL 33020
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:  DATE: **4-8-97** 954-792-0284

CR2E034 (9/96)