NOW: FILING FEE AFTER MAY 1 IS \$550.00 ROFIT **ORATION** NUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000010222 (3) **BRAVO TRUCK SERVICES, INC.

FILED Jun 02 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			
[7713 W 31 CT	-		
1713 W S1 CT HIALEAH FL 33018		HIALEAH FL 33018-3850			
					3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1996
	Place of Business	2a. Mailing Address			4. FEI Number 65-0637400 Applied For
21		26	· · · · · · · · · · · · · · · · · · ·		Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
Chy & Cyclo			27		Fee Hequired
City & State		City & State	} '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country Zip Co		Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intengible tax under s. 199.032,
24	25	29 30	ר '		Florida Statutes Pres No
= 1	9, Name and Address of Cur		<u>, </u>		10. Name and Address of New Registered Agent
BRA	VO, RAFAEL A		81	Name	
	3 W 31 CT		82	Ctropt Add	Hoose /D.O. Dav. N. Imphas is Net Assessible)
	EAH FL 33016		82	Street Add	dress (P.O. Box Number is Not Acceptable)
110			63		
			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 a	registered agent, or both, in the St. im familiar with, and accept the ob	ate of Florida. Such change was auti oligations of, Section 607.0505, Florid	norized by ia Statutes	ne corpora	ation's board of directors, i hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered	Lacon and title diapplicable (NOTE: Fr	logistered Age	nt signature regui	iirod whon reinstat ng) DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVTS	☐ DELETE	1.1 TITLE		Change Addition
NAME	Bravo, rafael a		1.2 NAME	1	•
STREET ADDRESS	7713 W 31 CT		1.3 STREET	ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33016		1.4 CITY - S	1 - ZiP	
TITLE			2.1 TITLE		Change Addition
NAME	BRAVO, RAFAEL A		2.2 NAME		
STREET ADDRESS	7713 W 31 CT		2 3 STREET	ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33016		2. 4 CITY - S	T-21P	
TITLE		☐ DELETE	31 TITLE	1	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STREET	ADDRESS	
CITY-ST-ZIP			3 4. CITY-S	T - Z(P	
TITLE		☐ DELETE	4.1 TITLE	}	☐ Change ☐ Addition
NAME			. 4. 2 NAME		
STREET ADDRESS			4.3 STREET	- [/
CITY-ST-ZIP		DELETE	4.4 CITY-S	T-ZIP	☐ Charlige ☐ Addition
TITLE		DELETE	5.1 TITLE		Addition
NAME			5.2 NAME		(K lab lam)
STREET ADDRESS			5.3 STREET	i	#1 (V-2/G-Z.
CITY-ST-ZIP		DELETE	5.4 CITY - ST 6.1 TITLE	1 - ZIP	Change Addition
TITLE					Change _ Muotiton
NAME CTOSET ADDOSEDS			6.2 NAME	ADORESE	\$11200
STREET ADDRESS			6.3 STREET	ADDRESS	BK Dep 165-
CITY-ST-ZIP		In all the No. P. P. P. Commission of the Commis	6.4 CITY-ST	I-ZIP	dis Continue (10 02/20/6) Florida Otatidas I fuella a segli di a di

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. Furida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.