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May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000010222 (3)

1. Corporation Name  
BRAVO TRUCK SERVICES, INC.

Principal Place of Business 7713 W 31 CT HIALEAH FL 33016	Mailing Address 7713 W 31 CT HIALEAH FL 33016
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
02/01/1996

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 65-0637400 Applied For Not Applicable	5. Certificate of Status Desired 8. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
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9. Name and Address of Current Registered Agent BRAVO, RAFAEL A 7713 W 31 CT HIALEAH FL 33016	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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 \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP 1. PVTs BRAVO, RAFAEL A 7713 W 31 CT HIALEAH FL 33016 2. D BRAVO, RAFAEL A 7713 W 31 CT HIALEAH FL 33016 3. TITLE NAME STREET ADDRESS CITY - ST - ZIP 4. TITLE NAME STREET ADDRESS CITY - ST - ZIP 5. TITLE NAME STREET ADDRESS CITY - ST - ZIP 6. TITLE NAME STREET ADDRESS CITY - ST - ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP
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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.

SIGNATURE: Rafael A. Bravo 4/24/98 (305) 362-3776  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)