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

SIGNATURE:

PROFIT FLORIDA DEPARTMENT OF STATE pro la Con D **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 98 JUL 16 PM 2: 48 P96000016172 (4) DOCUMENT # SECRETARY OF STATE TALLAHASSEE FLORIDA TONY'S TRUCKING, INC. Principal Place of Business Mailing Address 7951 S.W. 40TH STREET #208B 7951 S.W. 40TH STREET #208B MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21 26 65-0649416 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zipi Country Zip Country 8. This corporation owes or has paid the ourrent year Intangible 25 29 Personal Proporty Tax due June 30. □ No 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GINORIS. LEONOR M 7951 S.W. 40TH STREET #208B 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 84 City 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. Signature, typed or printed name of registered agent and title if applicable (NOT): Rog stered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. PVSD DELETE Change Addition TITLE 1.1 TITLE GINORIS, LEONOR M NAME 1.2 NAME 7951 S.W. 40TH STREET #208B STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33155** 1.4 CITY-ST-ZIP CITY-\$1-2(P DELETE 21 1IILE Change Addition TITLE 100002592391---07/17/98--01087--009 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-\$1-ZIP 2. 4 CITY - \$1 - ZIP <u>****900.00</u> DELETE 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - 7(P CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TOLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 1/TLF Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-\$1-7IP 6.4 CITY - ST - ZIP 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 trusted 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.

38526/6251