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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000020454 (0)

## FILED Jan 16 1998 8:00am Secretary of State

	TRANSPORT CORP.	Mailing Address			
471 N.W. 132ND PLACE		471 N.W. 132ND PLACE			
MIAMI FL 33182		MIAMI FL 33182		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	
	<del>,</del>			03/06/1996	
	Place of Business	<b>2a.</b> Mailing Address		4. FEI Number	Applied For
21 Suite, Apt.	fl. oto	[26] Suite, Apl. #, etc.		65-0648977	Not Applicable  \$8.75 Additional
22	# <sub>1</sub> O.C.	27		5. Certificate of Status Desired	Fee Required
City & Stat	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registers	ed Agent
SAULEUA, JULIE					
471 N.W. 132ND PLACE MIAMI FL 33182			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MIA	4MI FL 33 102		83		
ļ					
ļ			84 City	F	85 Zip Code
11. Pursuant office or a agent. I a	to the provisions of Sections 607.05 registored agent, or both, in the Statum familiar with, and accept the obligation by the opening name of reposered a	gations of, Section 607.0505, Fic	orida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	
12.		ND DIRECTORS	Registered Agent signature require  13.	red when reinstalling) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TiTLE	7,00110110,070111000110	☐ Change ☐ Addition
NAME	SAULEDA, JULIE		1.2 NAME		
STREET ADDRESS	471 N.W. 132ND PLACE		1.3 STREFT ADDRESS		į
CITY-ST-ZIP	MIAMI FL 33182		1.4 CHY-S1-ZIP		
TITLE	D	☐ DELETE	21 TITLE		Change Addition (
NAME	SAULEDA, NORBERTO		22 NAME		
STREET ADDRESS	471 N.W. 132ND PLACE		23 STREET ADDRESS		
CITY-S1-ZIP	MIAMI FL 33182	DELETE	2. 4 C(1Y-ST-Z(P	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE			3.1 NTI E		Change C Addition
NAME Street address			3.2 NAME 3.3 STREET ADDRESS		į
CITY-ST-ZIP			3.4. City-S1-ZIP		
TITLE		DELETE	411114		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TOTLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		į
CITY-ST-ZIP			54 CHY-S1-ZHP		
TITLE		DELETE.	6111111		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
מול בסינים	l		6 A COLV ST. 7IP		

14. Thereby 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 of the receiver of 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 attact ment with an address.

010111-110-

01-05-99 (205)225-6555