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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026282 (9)

V.L.A. TRUCKING, INC.

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 294 GATLING COURT 294 GATLING COURT WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0649675 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CESPEDES, LUIS C 294 GATLING COURT Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33415 83 Zip Code Pursuant to the provisions of Sectoffice or registered agent, or both orida Statules, the above-named corporation submits this statement for the purpose of changing its registered nange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am DRRS. 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ___ Change CESPEDES, LUIS C NAME 1.2 NAME 294 GATLING COURT STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33415 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE ___ DELETE Change Addition 2,1 TITLE CESPEDES, GLADYS L 2.2 NAME STREET ADDRESS 294 GATLING COURT 2.3 STREET ADDRESS WEST PALM BEACH FL 33415 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIF

14. I hereby certify that the information supplied with this filling does not qualify indicated on this annual report or supplemental annual report is true angles officer or director of the corporation or the receiver or trastee empty less Block 12 or Block 13 if ohanged, or onlan attachment with an angless of the provided of the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an a security execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE

1-12-98

561-478-0713