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 # P96000028014 (4)

AFFORDABLE TRUCKING, INC.

FILED May 05 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address				i afattast ma teria altu asut asut som som same	fibne imite natht thütt mist ibnt.	
655 COCONUT GROVE AVE 655 COCONUT GROVE AV						
W MELBOURNE FL 32904		W MELBOURNE FL 33	W MELBOURNE FL 32904		DO NOT WRITE IN THIS SPACE	
00		00			3. Date Incorporated or Qualified	
					03/25/1996	
2. Principal P	lace of Business	2a. Mailing Address	·····		4. FEI Number	Applied For
21		26	26		59-3372996	Not Applicable
Sulte, Apt. #, etc.		Suite, Apl. #, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		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 current year Intangible	
24]	25 Alama and Address of Curre	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
9, Name and Address of Current Registered Agent				1 Name	10. Name and Address of New Registers	A Agent
	RFORT, LISA					
655 COCONUT GROVE AVE			82 Street Ad		dress (P.O. Box Number is Not Acceptable)	
W MELBOURNE FL 32904			83			
ļ			Ľ			
			8	4 City	F	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 am familiar with, and accept the obligations of Section 607 0505. Florida Statutes.						
SIGNATURE Signature, typed or posted name of registered agont and trici if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12,	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE			Change Addition
NAME	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		1.2 NAM			
STREET ADDRESS 855 COCONUT GROVE AVE			13 STREET ADDRESS			
CITY-ST-ZIP			1.4 CITY-			
TITLE	ST DELET		21 TITLE			Change Addition
NAME	FERFORT, MARGUERITE F		2 2 NAME			
STREET ADDRESS	655 COCONUT GROVE AVE	:		ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY			
TITLE	,		3.1 TITLE			Change Addition
NAME STORES ADDRESS	FERFORT, LISA M 655 COCONUT GROVE AVE		3.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE	W. MELBOURNE FL 32904	DELETE	3.4. CITY 4.1 TITLE			Change Addition
NAME						C outside C vocilloit
1			4. 2 NAM	ET ADDRESS		
STREET ADDRESS	Program 44 company		4.3 STREE			
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE			- Change
NAME			5.2 NAME	1	_	The second of th
STREET ADDRESS				E1 ADDRESS	m in the contract of th	,
CITY-ST-ZIP					agent to the state of the stat	
TITLE		☐ DELETE	5.4 CITY - ST - ZIP DELETE 6.1 TITLE			Change Addition
NAME			6.2 NAME	i		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP						
MII.91.7%	l 		6.4 CITY-	31-ZIF		

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 13 if changed, or on an attachment with an address.