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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000035654 (8)

ETIENE TRANSPORTATION, INC.

Principal Place of Business

Mailing Address

**FILED** 

Apr 25 1997 8:00am

Secretary of State

Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Required  Fee Required  City & State  City & State  6. Election Campaign Financing \$5.00 May Be	7556 132ND STREET NORTH SEMINOLE FL <b>34646</b> 33776			7556 132ND STREET NORTH SEMINOLE FL 33776-3921							
Suite, Apt. #, etc.										ate of Las	st Report
Suite Apt #, etc.    Suite Apt #, etc.   Suite	2. Principal P	Place of Business	2a. Mail	2a. Mailing Address				4. FEI Number			Applied For
City & State    City & State	21		26	26				59-33/224	6		Not Applicable
City & State  Country  Zip  Zip  Country  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				5 Cortificate of Status Desired		\$8.7	5 Additional
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Second   S	<b>—</b>	├ŋ · ′	— — `		- '						er s. 199.032,
RISSUNG, ETIENNE   7556 132ND STREET NORTH   SEMINOLE FL3404K 33776   82   Street Address (P.O. Box Number is Not Acceptable)   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   Zip Code   85   Street Address (P.O. Box Number is Not Acceptable)   85   Zip Code   86   City   FL   85   Zip Code   86   City   FL   85   Zip Code   86   City   FL   86   Zip Code   Replaced   86   City   FL   86   Zip Code   City   Replaced   86   City   Sip Code   Sip C	24				30]						
### RETAIL STREET NORTH SEMINOLE FL. 3404K 33776  ### City  ### Ci	VIOO.	<del></del>	or Current Registered	Agent		01	Momo	10, Name and Address of New H	egisterea	Agent	
SEMINOLE FL. 34048. 33776  11. Pursuant to the provisions of Sociors 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of heanings are registered office or registered spent, or both, in the State of Florida Such change was nathorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered spent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of heanings are registered office or registered spent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered office or registered spent, or board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directors. Thereby accept the appointment as registered of the corporation's board of directo				81 Name			ivame				
B3					82 Street Addr			ddress (P.O. Box Number is Not Accepta	ble)		
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 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, and familiar with and accept the collegations of, Sociolo 607 0505, Florida Statutes.  SIGNATURE  SUBMINE Spread o product name of registered agraph and took damparable. PACT: Projectored Agent signature required when reviousing)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  Propicion to the provision of registered agraph and took damparable. PACT: Projectored Agent signature required when reviousing)  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY ST. ZIP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	<b>V2</b>					83					
11. Pursuant to the provisions of Socious 607 (2502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered affect or registered agent. I am familiar with, and accord the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE						84	City		Fi	85 Z	ip Code
office or registered agent, or both, in the State of Florids. Such change was author/zed by the corporation's board of directors. I hereby accept the appointment as registered agent agent to enhige the obligations of Section 607.0505, Floridas Statutes.  SIGNATURE    12	11. Pursuant	to the provisions of Sections	607.0502 and 607.15	08, Florida Statu	ites, the al	oove	-named c	orporation submits this statement for the	DUITOOSO O	changin	a its registered
SIGNATURE    Signature typed or printed name of trops served any function of any served and served any function of any served any function of any served and served any served and served any served any served and served any served any served any served any served and served any served and served any served any served and served any served and served any served and served and served any served and served and served any served any served and served any served any served any se	office or r	registered agent, or both, in	the State of Florida Su the obligations of Sec	ich change was tion 607 0505 F	authorized	d by	the corpo	ration's board of directors. I hereby acce	pt the app	ointment	as registered
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-	5%			ionoa otal	4.00		4-1	7 - 0	77	
TITLE	SIGNATURE	Signature, typed or printed name of re	gistered age if and title if appli	able (NO	TE Hogistores	d Age	nt signature re	quired when reinstating)	DATE		
NAME   STREET ADDRESS   7556   732ncl   SL   N	12.		ERS AND DIRECTOR	s	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECT	ORS IN 12
Seminole FL 33776	TITLE	President		☐ DELETE	1.1 10	TLE	ŀ			☐ Chang	ge 🔲 Addition
Seminole FL 33776	NAME	Etienne Kissi	ing		1.2 NA	ME	ŀ				
TITLE         Vice President         DELETE         21 TITLE         Addition           NAME         Silvid Kissling         22 NAME         22 NAME           STREET ADDRESS         132 not St. N.         23 STREET ADDRESS         24 CITY-ST-ZIP           TITLE         DELETE         31 TITLE         Change         Addition           NAME         32 NAME         32 NAME         33 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           NAME         41 TITLE         Change         Addition         Addition         Addition           NAME         42 NAME         42 NAME         Change         Addition           STREET ADDRESS         44 CITY-ST-ZIP         Change         Addition           NAME         52 NAME         Change         Addition           NAME         53 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           NAME         53 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           NAME         53 STREET ADDRESS         CITY-ST-ZIP         Change         Addition	STREET ADDRESS	7556 132nd. S	L.N.		1.3 S1	REET	ADDRESS				i
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CRIV-ST-ZIP   Servinole FL 33776   2 4 CIIV-ST-ZIP	NAME	Silvia Kisslin	00		2.2 N/	MF					
City-St-ZiP   Servinole FL . 33.776   2 4 City-St-ZiP	STREET ADDRESS	7556 132nd	st.N.		2.3 S1	REET	ADDRESS				
NAME	CITY-ST-ZIP	Seminole FL	33776		2 4 C	IY-S	I - ZIP				
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NAME	CITY-ST-ZIP				3.4. CI	IY-S	1 - ZIP				
### STREET ADDRESS  CITY-ST-ZIP  ### ACITY-S1-ZIP  #### ACITY-S1-ZIP  #### ACITY-S1-ZIP  #### ACITY-S1-ZIP  #### ACITY-S1-ZIP  #### ACITY-S1-ZIP  #### ACITY-S1-ZIP  ###################################	TITLE			☐ DELETE	4.1 10	LE				Chang	je Addition
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STREET ADDRESS 6.3 STREET ADDRESS	1						ADDRESS				
i i					6.4 CITY - ST - ZIP						

14. I do 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 offect as if made under oath; that tam 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.