## 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 # P9600066843 (9)

BRODEUR TRANSPORT, INC.

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			<del></del>	· · · · · · · · · · · · · · · · · · ·				
13434 SW 59 MIAMI FL 3318		13434 SW 59 TER. Miami Fl 33184				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						08/12/1996		
	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21		26 16901 S.DIXIE HWY			VY	65-0688078 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
Zip Country		28 MIAMI FLORIDA Zip Country				Trust Fund Contribution LJ Added to Fees		
Zip 24	h	Z(p	$\vdash$	•	N 173	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	25   29 3 3 1 5 7		30	30 DADE		1p. Name and Address of New Registered Agent		
PD(	<del>=</del>			81	Name			
BRODEUR, RICHARD 13434 SW 59 TER.				<b>55</b> 0: 14 1		(D.O. Davidson in Unit Assessable)		
	MI FL 33184			82 3	Street Addir	ress (P.O. Box Number is Not Acceptable)		
			L					
				84 (	City	FL 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 printed name of registered a	1100	e b			irod when reinstaling) DATE		
12.		ND DIRECTORS	13.	Agoni	ediamie iedou	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE		1.1 TITLE		☐ Change ☐ Addition		
NAME	BRODEUR, RICHARD		1.2 NA	1.2 NAME				
STREET ADDRESS	13434 SW 59 TER.		1.3 STREET ADDRE		DDRESS			
CITY-ST-ZIP	MIAMI FL 33184		1.4 CIT	TY-ST-Z	ZIP			
TITLE	PVST	☐ DELETE	2.1 10	LE		☐ Change ☐ Addition		
NAME	<b>BRODEUR</b> , RICHARD			2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS	13434 SW 59 TER.							
CITY-ST-ZIP	MIAMI FL 33184		_	ITY-ST-	ZIP			
TITLE		DELETE 3.1 TIT				☐ Change ☐ Addition		
NAME AVDOCT ADADOCCO			3.2 NA		DOLCC			
STREET ADDRESS			3.3 STREET ADDRESS 3.4. CITY - ST - ZIP					
CITY-ST-ZIP TITLE		DELETE 4.1 DILL			- ¢1F	Change Addition		
NAME			4. 2 N/					
STREET ADDRESS				REET AD	ODRESS			
CITY-ST-ZIP				TY-\$T-2				
TITLE		DELETE	5.1 1≀1			Change Addition		
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CI1	CITY-ST-ZIP				
TITLE	DELETE 6.1		6.1 TIT	IITLE		☐ Change ☐ Addition		
NAME			6.2 NA	ME	1			
STREET ADDRESS	IEET ADDRESS 6.3		6.3 ST	STREET ADDRESS				
CITY-ST-ZIP				TY-ST-2				
14. I hereby o	certify that the information supplies	with this thing does not qualify f	or the exe	mptio	on stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information		

report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in