

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

Amended

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 MAR 16 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000068639 (9)**
Corporation Name
H AND R LOGISTICS INC.

Principal Place of Business

7555 N.W. 63RD STREET
MIAMI FL 33166

Mailing Address

7555 N.W. 63RD STREET
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1996

1. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

Country

4. FEI Number

65-0697967

Appli
Not A

5. Certificate of Status Desired ☐

\$8.75 Add
Fee Requi

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 Ma
Added to F

8. This corporation owes or has paid the current year Intang
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SCARBRO, RICHARD
7465 S.W. 140 DRIVE
MIAMI FL 33158

10. Name and Address of New Registered Agent

81 Name

SHARON PHILLIPS

82 Street Address (P.O. Box Number is Not Acceptable)

83

7555 NW 63 STREET

84 City

MIAMI

FL

85 Zip, Code
33166

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 re
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 reg
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Sharon H. Phillips *L. B. Phillips* 3/2/98

Signature, typed or printed name of registered agent and type if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IF

TITLE **DPT** ☒ DELETE
NAME **SCARBRO, RICHARD D**
STREET ADDRESS **7465 S.W. 140TH DRIVE**
CITY-ST-ZIP **MIAMI FL 33158**

TITLE **DVS** ☒ DELETE
NAME **SCARBRO, REGINA L**
STREET ADDRESS **7465 S.W. 140TH DRIVE**
CITY-ST-ZIP **MIAMI FL 33158**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE **DPT** ☒ Change ☐
1.2 NAME **SHARON PHILLIPS**
1.3 STREET ADDRESS **7555 NW 63 STREET**
1.4 CITY-ST-ZIP **MIAMI, FL 33166**

2.1 TITLE **DVS** ☒ Change ☐
2.2 NAME **BERNIE PHILLIPS**
2.3 STREET ADDRESS **7555 NW 63 STREET**
2.4 CITY-ST-ZIP **MIAMI, FL 33166**

3.1 TITLE ☐ Change ☐
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 inform
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
officer or director of the corporation or the officer 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 on an attachment with an address.

Richard Scarbro 1/12/98 (305) 422-11