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 # P96000072809 (2)

KREIDER TRANSPORT, INC.

FILED Jun 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
4974 96TH ST N 4974 96TH ST N ST PETERSBURG FL 33706 ST PETERSBURG FL 33706			1 0					
ST FETENSBONS TE 33700		31 PCIENSDUNG PL 33700				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
		·				08/27/1996		
· ·	flace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	pplied For
21		26				59-3398364		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional equired
City & State		City & State		A Floring Compaign Financies				
23		28	n '			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	7 _{IP}	Cou	ntry		8. This corporation owes or has paid the cur		
24	25	29	30] No
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	Agent	
* KRI	eid e r, dale		1	81	Name			
497	74 96TH ST N		<u> </u>	82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
√ ST	PETERSBURG FL 33708		Į	_				
				83				
				84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607, 1508. Florida Statute	es, the at	l	named core	poration submits this statement for the purpose of	changing i	ts registered
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	ent Florida. Such change was a	authorized	l by	the corporat	tion's board of directors. I hereby accept the app	ointment as	registered
SIGNATURE	within the contract the contract	is in crooker our rood, I to	and white		•			
Signature, typed or profed name of registered agent and tyle if applicable (NOTE Re				Age	nt signature requi	red when reinstaling) DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PSTO PALE	[] DELETE	1.1 Tri				☐ Change	☐ Addition
NAME	KREIDER, DALE		1.2 NA					
STREET ADDRESS	4974 96TH ST N				ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33708			1.4 CITY - ST - ZIP 2 1 TITLE			Change	Addition
TITLE NAME			2 2 NA				Unange	LT VOOITION
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			4					
TITLE	DELFIE			2, 4 C/TY - ST - Z/P 3,1 T/TLE			Change	Addition
NAME		-	3,2 NA					
STREET ADORESS					ADDRESS			
CITY-ST-ZIP			3.4. CI					
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4,1 TIT				Change	☐ Addition
NAME	•		4, 2 N/	AME				
STREET ADDRESS			4.3 ST	REEL	ADDRESS			
CITY-ST-ZIP			4,4 CIT	Y - ST	- ZIP			
TITLE		DECETE	5.1 TIT	LE			Change	☐ Addition
NAME			5.2 NA	ME.	1			
STREET ADDRESS			5,3 ST	RÉET .	ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y-S1	- ZIP			
TITLE		DELETE	61111	LF.			Change	Addition
NAME			6 2 NA	ME				
STREET ADDRESS			6351	REELA	ADDRESS			
OUT Y OT THE			CACIT		- 710			ř

14. Thereby 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 of 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 charged, of over an attachment with an address.

CIONIATURE.

15-2-98

1813-297-774