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 # P96000077157 (1)

JDL TRANSPORT, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				I INDRINDEN HIN TOHIE BINNI BRINI BRINI BRINI BRINI TENK TORRI 11961 TUKK TORK TORK		
3523 FORTUNA DR		3523 FORTUNA DR						
ORANGE PARK FL 32065		ORANGE PARK FL 32065				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						09/17/1996		
2. Principal Pla	ace of Business	2a. Maising Address				4. FEI Number	A	pplied For
21		26				59-3399598	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22		27			·	b. Certificate of Status Desired	Fee R	equìred
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	}- -1	Country		8. This corporation owes or has paid the cu		
24	25	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registered		_ No
	9. Name and Address of Curre	iii uadistelan Adaut		B1	Name	10. Hame and Address of New Registered	Agont	
	SSON, DANIEL L				TTGTT C			
	3 FORTUNA DRIVE			62	Street Addre	ddress (P.O. Box Number is Not Acceptable)		
ORA	INGE PARK FL 32065			63				
				84	City	FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutos, 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. CICNATURE								
SIGNATURE Signature, typed or printed name of tage, teres agest and title diapplicable (NOTE: Registered Agent signature required when renstating) DATE								
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	ST	☐ DELETE	1.1 10	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			Change	☐ Addition
NAME	DOBSON, CYNTHIA		1.2 NA					
STREET ADDRESS	8523 FORTUNA DR		1.3 \$1					
CITY-ST-ZIP	ORANGE PARK FL 32065	T serets					01	T addition
TITLE		☐ DELETE	2 1 TI				☐ Change	☐ Addition
NAME			2.2 NA					
STREET ADDRESS				2 3 STREET ADDRESS 2 4 City - St - Zip				
CITY-ST-ZIP		DELETE	2 4 C		r·ziP		Change	Addition
TITLE			3.2 NA				C. Onlinge	
NAME OXDEET ADDRESS					ADDRESS			
STREET ADDRESS					ŀ			
CITY-ST-ZIP TITLE		☐ DELETE	3 4. C		1-211		Change	Addition
NAME			4 2 N				Ţ	
STREET ADDRESS					ADDRESS			1
CITY-ST-ZIP			4	4 4 CITY-S1-ZIP				
TITLE		☐ DELETE	: 51 TII	ILE			☐ Change	☐ Addition
NAME			5.2 NA	AME				
STREET ADDRESS	59		5 3 ST	AEET,	ADDRESS			1
CITY-ST-ZIP			5.4 Cf	TY-\$1	- Z IP			
TITLE		☐ DELETE	61 Til	TLE			Change	Addition
NAME			62 NA	AME				
STREET ADDRESS			63 ST	AEET A	ADDRESS			
CITY-ST-ZIP			64 CF					
54 I becoby or	- Alf . Al C Al C - I	attention Cities and a second second bill			المنامعة مما	Section 110 07/3Vi) Florida Statutos, I further of	بطغ لمطف بالأنام	s information

4. I hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or frustee 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.

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