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

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## OCUMENT # P96000078432 (7) RNZ TRANSPORT. INC.

PEMBROKE PINES FL 33026  PEMBROKE PINES FL 33026-3903  3.  2. Principal Place of Business  2. Mailing Address  4.  3. Suite, Apt. #, etc.  2. Suite, Apt. #, etc.  2. City & State  City & State  City & State  City & State  7. Country  8. Suite, Apt. #, etc.  2. Principal Place of Business  2. Suite, Apt. #, etc.  3. City & State  City & State  City & State  Country  8. Suite, Apt. #, etc.  5. City & State  City & State  9. Name and Address of Current Registered Agent  10. RIENZO, MARIA  10545 NW 11TH STREET  PEMBROKE PINES FL 33028  83  84 City  11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's tagent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or period frame of hegistered agent and title day standard. (NOT): Registered Agent signature required when the provision of the provision of provisions of DELICE SAND DIRI CTORS  11. TITLE  12. OFFICERS AND DIRI CTORS  13. 1.1 TITLE  14. TITLE  15. TITLE  16. DILETE  16. Suite, Apt. #, etc.  5. Country  8. Authorized Agent signature required when the provision of th	Date incorporated or Qualified  09/20/1996  For Number  65-0694087  Certificate of Status Desired  Election Campaign Financing Trust Fund Contribution  This corporation has liability for integral graphs and the surface of the surfa
10545 NW 11TH 8TREET   10545 NW 11TH 8TREET   PEMBROKE PINES FL 33026   303   3.	Date Incorporated or Qualified  09/20/1996  For Number  Certificate of Status Desired  Election Campaign Financing Trust Fund Contribution  3a. Date of Last Report  Applied For Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be Added to Fees
PEMBROKE PINES FL 33028  2. Principal Place of Business 2. Mailing Address 3. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 3. City & State 4. City & State 5. City & State 6. Suite, Apt. #, etc. 3. Principal Place of Business 4. City & State 5. City & State 6. Suite, Apt. #, etc. 5. City & State 7. City & State 8. City & State 8. Country 8. RIENZO, MARIA 10545 NW 11TH STREET PEMBROKE PINES FL 33028  8. Street Address (F. Basel and Exercise Agent and Exercise Agent and Exercise Agent and Exercise Agent and Exercise Address (F. Basel A	09/20/1996  For Number
28. Mailing Address 4. Mailing Address 4. Mailing Address 4. Mailing Address 4. Mailing Address 5. Suite, Apt. #, etc. 5. City & State City & State City & State 28	09/20/1996  For Number
2. Principal Place of Business   2a. Mailing Address   4.	09/20/1996  For Number
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  7ip  Country  8.  PEMBROKE PINES FL 33028  Street Address of Current Registered Agent  Name  10545 NW 11TH STREET  PEMBROKE PINES FL 33028  Street Address (F  PEMBROKE PINES FL 33028  PEMBROKE PINES FL 33028  Street Address (F  PEMBROKE PINES FL 33028  Street Address (F  PEMBROKE PINES FL 33028  Street Address (F  PEMBROKE PINES FL 33028  B1  City  City  Country  8.  City  Street Address (F  PEMBROKE PINES FL 33028  B2  Street Address (F  PEMBROKE PINES FL 33028  B3  B4  City  City  Street Address (F  PEMBROKE PINES FL 33028  B3  B4  City  City  Street Address (F  PEMBROKE PINES FL 33028  B3  B4  City  City  Street Address (F  PEMBROKE PINES FL 33028  B3  B4  City  City  DITER  Signature typed or pined frame of registered agent and when Imprisonable  (NOT) Hegistered Agent signature required when Inc.  PD  NAME  RIENZO, MARIA  DITER  12 NAME	Certificate of Status Desired Status Desired Fee Required  Election Campaign Financing Trust Fund Contribution Added to Fees
Suite, Apt. #, etc.    Suite, Apt. #, etc.	Certificate of Status Desired
City & State  Country  A  Pip  Country  B.  RENZO, MARIA  10545 NW 11TH STREET  PEMBROKE PINES FL 33026  B2  Street Address (F  Street Address (F  PEMBROKE PINES FL 33026  B3  B4  City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's tagent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or pricted name of registered agent and title diapplicable  OFFICE RS AND DIRI CTORS  TITLE  PD  NAME  RIENZO, MARIA  City  DITTLE  DIT	Fee Required  Election Campaign Financing Trust Fund Contribution  Fee Required  \$5.00 May Be Added to Fees
Zip   Country   Zip   Country   8.	Trust Fund Contribution Added to Fees
Zip Country Zip Country 8,  25 29 30 10.  9. Name and Address of Current Registered Agent 10.  RIENZO, MARIA 10545 NW 11TH STREET PEMBROKE PINES FL 33026 82 Street Address (F. PEMBROKE PINES FL 33026 83 84 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's fagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or printed name of registered agent and titled applicable (NOT) Registered Agent signature required when 12.  OFFICE RS AND DIRI CTORS 13.  TITLE PD	This corporation has liability for intrincible tax under s. 199 032
9. Name and Address of Current Registered Agent 10.  RIENZO, MARIA 10545 NW 11TH STREET 82 Street Address (F. PEMBROKE PINES FL 33026 83 84 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's tagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature typed or prized frame of registered agent and title diagraticable (NOT) Registered Agent signature required when 12.  OFFICERS AND DIRECTORS 13.  TITLE PD DITER 1.1 BILE 1.2 NAME	
RIENZO, MARIA  10545 NW 11TH STREET  PEMBROKE PINES FL 33028  82 Street Address (F  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's Eagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or printed name of registered agent and titled applicable.  (NOT: Registered Agent signature required when the province of the printed Agent signature required when the province of the printed name of registered agent and titled applicable.  In the province of the province of the printed name of registered agent and titled applicable.  In the province of the province of the printed name of registered agent and titled applicable.  In the province of the province of the printed name of registered agent and titled applicable.  In the province of the province of the province of the printed agent and titled applicable.  In the province of the province of the province of the printed agent and titled applicable.  In the province of the province of the printed agent and titled applicable.  In the province of the province of the printed agent and titled applicable.  In the province of the province of the printed agent and titled applicable.  In the province of the province of the printed agent and titled applicable.  In the province of the province of the printed agent agent and titled applicable.  In the province of the province of the printed agent ag	Florida Statutes Yes No
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PEMBROKE PINES FL 33028  83  84 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's tagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or printed name of registered agent and titled applicable.  INCIT. Registered Agent signature required when the provided in the	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's tagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or privod name of registered agent and titled applicable.  INCIT: Registered Agent signature required when the privod name of registered agent and titled applicable.  OFFICE RS AND DIRECTORS  13.  TITLE  PD  NAME  RIENZO, MARIA	The second secon
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agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or priced famile of registered agent and titled applicable  (NOTE Registered Agent signature required when the process of th	FL 85 Zip Code
Signature typed or privided name of registered agreed and title of applicable.  12. OFFICERS AND DIRECTORS  13.  TITLE  PD  RIENZO, MARIA  1.2 NAME  1.2 NAME	n submits this statement for the pulpose of changing its registered locard of directors. I hereby accept the appointment as registered
TITLE PD DELETE 1.4 THE 1.4 THE 1.2 NAME	
NAME RIENZO, MARIA 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
AABAR ANN AATH ATREET	Change Addition
STREET ADDRESS 10545 NW 11TH STREET 1,8 STREET ADDRESS 1.	
CITY-ST-ZIP PEMBROKE PINES FL 33028	
TITLE STD DELETE 2.4 TOLE	Change Addition
NAME GAINS, JODI R	
STREET ADDRESS 10545 NW 11TH STREET 2.8 STREET ADDRESS	
DITY-ST-ZIP PEMBROKE PINES FL 33026 2.4 CHY-S1-ZIP	
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NAME 62 NAME	Change Addition
STREET ADDRESS 6.3 STREET ADDRESS	· Change Addition
CITY-ST-ZIP 6.4 CITY-ST-7IP	Change Addition
<b>14. I do hereby certify</b> that the information supplied with this filing does not qualify for the exemption stated in Sc information indicated on this annual report or supplemental annual report is true and accurate and that my si	