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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPÓRATIONS

DOCUMENT # P96000091327 (2)

B & A TRANSPORTATION, INC.

Principal Place of Business Mail

Mailing Address

FILED May 16 1997 8:00am Secretary of State



12203 MANADO ORLANDO FL 3		12203 MANADO STREET ORLANDO FL 32837-8739	12203 MANADO STREET ORLANDO FL 32837-8735						
						3. Date Incorporated or Qualified 10/31/1996	3a. Da	te of Last	Report
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FE! Number			Applied For
21		26	26			59-3422701			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	} 1			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	⊢₁ ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25	7ip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Cu	rrent Registered Agent			r	10. Name and Address of New Re	gistered A	igent	
ABR	eu, Benjamin			81	Name				
12203 MANADO STREET Orlando Fl 32837					Street Addi	iress (P.O. Box Number is Not Acceptable)			
- · · · ·				83		20 0 0 0 0			
				84	City	1 A 1/4 A 10 A 1	FL	85 Z.II.	Code
office or r	to the provisions of Sections 607, egistered agent, or both, in the S im familiar with, and accept the of	tate of Florida. Such change was	s authorized	d by	y the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	ourpose of of the app	changing pintment a	its registered is registered
SIGNATURE	Signature, typod or printed name of registers	d agent and title if applicable (NC	OTE: Registered	i Agr	ont signature requi	red when revistating)	DATE		
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND		
TITLE	D	☐ DELETE	11111	LF				Change	Addition
NAME	ABREU, BENJAMIN		1,2 NA	ME					
STREET ADDRESS	12203 MANADO STREET		1,3 \$1	RECT	ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32837	Diverse	1,4 CI		51 - 7IP			Change	Addition
TITLE		DELETE	21711		į	•		Change	e L Addition
NAME			2,2 NA		11.00000				
STREET ADDRESS					ADDRESS				
CITY+ST+ZIP TITLE		DELFTE	3 1 111		SI-ZII ²			Change	Addition
NAME			3.2 NA					_	_
STREET ADDRESS			3,3 \$1	REF I	I ADDRESS				
CITY-ST-ZIP			3,4. CI	(TY-	S1- <i>7</i> (P				
TITLE		DELFTE	4,110	LE				Change	Addition
NAME			4, 2 N	AME					
STREET ADDRESS			4,3 \$1	REET	I ADDRESS				
CITY-ST-ZIP		. <u>.</u>	4,100	17-8	ST-7IP				
TITLE		☐ DELETE	51111					Change	Addition
NAME			5,2 NA						
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP		DELETE			S) - 7IP			Change	Addition
TITLE		L.J DELETE	61 TH					FT Change	, LJ KOUIIUII
NAME			62 NA		ADDOESS				
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP	<u> </u>		6.4 CI	1Y-8	ST-ZIP				

14. I do 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

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