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

•PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P96000091574 (9)

M & K TRANSPORT, INC.

## FILED May 14 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address					
RT. 2. BOX 800-G BRYCEVILLE FL 32009		RT. 2. BOX 800-G Bryceville Fl. 32009					
					Date Incorporated or Qualified     11/04/1996	3a. Date of Last	Report
2. Principal Place of Business 21 1624 Otio Rd .		26. Mailing Address 26 Pd 2 Box	800 61		4. FEI Number 59-3412561	·	pplied For lot Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	T	Additional lequired
cive State  BKyceoille, FL		Sity & State  28 DKYCEU'lle, FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24 32009 25	Du Va (	29 38009	30 Countr	ival		Yes No	s. 199.032,
	Address of Current	Registered Agent	8	II Nome	10. Name and Address of New Reg	istered Agent	
SMITH, KENNETHA	. K		ľ	l Name			
RT. 2, BOX 800-G BRYCEVILLE FL 32009			8	82 Street Address (P.O. Box Number is Not Acceptable)			
BRICEVILLE PL 32	009		8:	3		····	
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			84	City		FL 85 Zig	Code
SIGNATURE Signature, typed or pro	nted name of registered agent	I and title if applicable.	NOTE: Registered A		coration submits this statement for the policion's board of directors. I hereby acception when reinstating)	DATE	
12. DRUSIOLE	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
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STHEET ADDRESS 1624 0	TIS Rd		1.2 NAME	ET ADORESS			
CHY-ST-ZIP BRYCEU	ille, FL 30	0009	1.4 CITY-				
THLE Vice - PE	esident	, DELETE	2.1 TITLE	<del></del>		Change	Addition
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4. 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 oath; that I am an officer or director of the porporation or the receiver 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, or on an attactment with an address.

SIGNATURE

BIGNATURE AND TYPEO OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Busident 4/25/97

404-660

Daytime Phone