

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

**FILED**  
**Apr 10 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000000717 (3)**  
 1. Corporation Name  
**N & L TRANSPORT CORP.**



Principal Place of Business <b>1835 WEST 76TH ST HIALEAH FL 33014</b>	Mailing Address <b>1835 WEST 76TH ST HIALEAH FL 33014</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/03/1997</b>	
21 <b>1855 WEST 76 ST</b>	26 <b>1855 WEST 76 ST</b>			4. FEI Number <b>65-0715554</b>	
Suite, Apt. #, etc. 22 <b>HIALEAH</b>		Suite, Apt. #, etc. 27		Applied For Not Applicable	
City & State 23 <b>HIALEAH, FL</b>		City & State 28 <b>HIALEAH, FL 33014</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24 <b>33014</b>	Country 25 <b>USA</b>	Zip 29 <b>33014</b>	Country 30 <b>USA</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent  
**SANCHEZ, LUIS**  
**1855 WEST 76TH ST**  
**HIALEAH FL 33014**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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.

SIGNATURE **LUIS SANCHEZ** *[Signature]* DATE **1-5-98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>FERRO, NORBETO</b>	
STREET ADDRESS	<b>1835 WEST 76TH ST</b>	
CITY-ST-ZIP	<b>HIALEAH FL 33014</b>	
TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>SANCHEZ, LUIS</b>	
STREET ADDRESS	<b>1855 WEST 76TH ST</b>	
CITY-ST-ZIP	<b>HIALEAH FL 33014</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>SANCHEZ, LUIS</b>	
1.3 STREET ADDRESS	<b>1855 WEST 76 ST</b>	
1.4 CITY-ST-ZIP	<b>HIALEAH FL 33014</b>	
2.1 TITLE	<b>VD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>JOAN S. SANCHEZ</b>	
2.3 STREET ADDRESS	<b>1855 W 76 ST</b>	
2.4 CITY-ST-ZIP	<b>HIALEAH FLA 33014</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 corporation 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 attachment with an address.

SIGNATURE *[Signature]* **JOAN S. SANCHEZ** DATE **1-5-98** (305) 556-9125

CR2E034 (10/97)