FILE NOW: FILING FEE AFTER MAY 1001 18 \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97ØØØØØ 1938

HIL. BERRY TRUCKING, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

1902 S.E. 19th Lane Cape Coral, FL 33990 FILED Mar 24 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		Not Applicable
Suite, Apt	. #, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
241	9. Name and Address of Curre			10. Name and Address of New Registered Agent
				9
	H.L. Berry 1902 S.E. Cape Coral) _	B2 Stree	t Address (P.O. Box Number is Not Acceptable)
	1902 S.E.	19th Lan	ne 83	
	0 - 0	C/ 2201	ά <u>ν</u>	
	Cape Coral	FC 339	90 84 City	85 Zip Code
				d corporation submits this statement for the purpose of changing its registered
office or r	registered agent, or both, in the State	e of Florida. Such change was	s authorized by the co	rporation's board of directors. I hereby accept the appointment as registered
agent. La	am (amiliar with, and accept the oblig	jations of, Section 607.0505, I	Florida Statutes.	
SIGNATURE				
	Signature types or protect name of registered as	VD DIRECTORS (No	OTE Registered Agent signatu	
12.	,	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Director	☐ DELETE	1.1 TITLE	Li Change Li Addition
NAME	H.L. Berry 19th		1.2 NAME	
STREET ADDRESS			1 3 STREET ADDRESS	
CITY-ST-ZIP		<u>-L 33990</u>	1 4 CHY+ST-ZIP	
TITLE	President	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	H.L. Berry		2.2 NAME	
STREET ADDRESS	1902 55 19th La	1e	2.3 STREET ADDRESS	
CITY - ST - ZIP	Cope Ceral FL	1 = 33990	2 4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. C(TY-S]~Z)P	
. TITLE		☐ DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	$\Lambda \overline{C}$
STREET ADDRESS			5 3 STREFT ADDRESS	The state of the s
				13.29
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	Addition
NAME		_ Milli	6 2 NAME	80000246684°°° Addition -03/24/9801051027
				-03/24/9801051027
STREET ADDRESS			63 STREET ADDRESS	***150.00
CHY-\$1-ZIP	partify that the information presided	its this files does not a sold.	for the exemption state	and in Specian 110 07(20) Elevido Statutes I further portify that the in-
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes: I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes: I further certify that the information indicated on this annual report or supplied to supplied 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 if changed, or on an attachment with an address.				