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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthant

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700006642 (7)

HOTY TRANSPORT. INC.

FILED May 15 1998 8:00am Secretary of State

j.						
Principal Place of Business Mailing Addross					3 4401000 SED EDEST LOGIS DOUS DOUS DOUS DOUS DOUS DISSO DISSO BISES BEIDD TING CONT.	
1380 SOUTH	MAIN STREET	1360 SOUTH MAIN STRE	1360 SOUTH MAIN STREET			
BELLE GLAD	E FL 33430	BELLE GLADE FL 33430		DO NOT WRITE IN TH	IS SPACE	
ı					3. Date Incorporated or Qualified	- OF NOL
					01/17/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		650718613	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		J. Commedia of Grand Doorload	Fee Required	
City & Stato		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Z8 / Country Zip Co		Count	īv	8. This corporation owes or has paid the	
24	25	harman from the first that the first		. ,	Personal Property Tax due June 30.	Yes No
 	9. Name and Address of Curren		1		10. Name and Address of New Registers	
CA	STANEDA, RENE M		8	1 Name		
1360 SOUTH MAIN STREET			8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
- BELLE GLADE FL 33430			Ľ		ords (F.S. Box Hambor to Hot / tocopiable)	
			[8	3		
			8	4 City		85 Zip Code
* •					F	
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						
	Signature typed or printed name of registered age			gnnt signature req	uired when reinstating) DATE	
12.	OFFICERS AND	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	4.07.11001 00110.41		1.2 NAM			E onunge E resultant
STREET ADDRESS	ASSES ASSESSED ATTEMPT		1.3 STREET ADDRESS		•	[8]
CITY-ST-ZIP	SPILE OLADE PLASAGE		1.4 CITY	}		X
TOTLE	D	DELETE	2.1 TITLE			Change Addition
NAME	CASTANEDA, ADELY		22 NAM	Ε }		Ì
STREET ADDRESS	AAAA AALITI MAKKI ATAPPT		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2.4 CITY	-ST-ZIP		
TITLE		DELETE 3.1 T		.		Change Addition
NAME	3.2 N		3.2 NAM	E		
STREET ADORESS	I			ET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY			Change Addition
TITLE		T"I NETFIE	4.1 TITLE	ì		☐ Change ☐ Addition
NAME DESCRIPTION			4 2 NAM			
STREET ADDRESS				E1 ADDRESS	•	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			1	ET ADDRESS		}
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS	1.		6.3 STRE	et address		}
CITY-ST-ZIP			6.4 CITY	- ST - ZIP		
14 Lhereby C	erlify that the information supplied wi	th this filing does not qualify to	r the even	ntion stated i	n Section 119 07(3)(i) Florida Statutes Lifurther	certify that the information

14. Thereby 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 an attachment with an address.

Block 12 of block 15 st changed, of State attachment with

4-7-48

(S(1) 992-4155