SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE; \$750).

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P97000022111 (3)

MALIBU TRANSPORTATION, INC.

## **FILED** Aug 13 1998 8:00am Secretary of State



Principal Place of Business 11500 WESTWOOD BLVD. APT. 1624 ORLANDO FL 32821  2. Principal Place of Business 2. Mailing Address 11500 WESTWOOD BLVD. APT. 1624 ORLANDO FL 32821  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified 03/11/1997  2. Principal Place of Business 2. Mailing Address 4. FEI Number 2. FEI Number 2. FEI Number 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. Suite, Apt. #, etc. 3. Date Incorporated or Qualified 03/11/1997  4. FEI Number 5. Certificate of Status Desired 5. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. Signature, Incorporation owns or has paid the current part Intensigable 2. Principal Place of Status Desired 3. Date Incorporation owns or has paid the current part Intensigable 2. Added to Fees 2. This corporation owns or has paid the current part Intensigable 2. Principal Place of Status Desired 3. Date Incorporation owns or has paid the current part Intensigable 2. Street Address of New Registered Agent 3. Date Incorporation owns or has paid the current part Intensighed 3. This corporation owns or has paid the current part Intensighed 3. This corporation owns or has paid the current part Intensified 3. This corporation owns or has paid the current part Intensified 3. This corporation owns or has paid the current part Intensified 3. This corporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid the current part Intensified 3. Date Incorporation owns or has paid to the Part Intensified 3. Date Incorporation owns or ha
ORLANDO FL 32821  ORLANDO FL 32821  ORLANDO FL 32821  ORLANDO FL 32821  DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  O3/11/1997  2. Principal Place of Business  2a. Malling Address  4. FEI Number  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  28  Zip  Zip  Country  Zip  Country  29  30  Personal Property Tax due June 30. we so Now Registered Agent  CARVALHO, JOSE V  11500 WESTWOOD BLVD., APT. 1624  ORLANDO FL 32821  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 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, Strong Statutes  Signature, Syned or winted name of registered agent of 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, 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, 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, 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, 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, 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 or both and are of registered agent appointment as registered Agent signature required when reinted when
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2. Principal Place of Business 2. Malling Address 3. Certificate of Status Desired 3. Required 4. FÉI Númber 5. Gertificate of Status Desired 3. Required 5. Certificate of Status Desired 3. Required 4. FÉI Númber 5. Gertificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing 7. That Fund Contribution 7. Name and Address of New Registered Agent 8. This corporation owes or has paid the current year Intangible 7. Personal Property Tax due June 30. Yes No 8. This corporation owes or has paid the current year Intangible 7. Name and Address of New Registered Agent 8. This corporation owes or has paid the current year Intangible 7. Name and Address of New Registered Agent 8. This corporation owes or has paid the current year Intangible 8. This corporation owes or has paid the current year Intangible 8. This corporation owes or has paid the current year Intangible 8. This corporation owes or has paid the current year Intang
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Suite, Apt. #, etc.    Suite, Apt. #, etc.
22] S. Certificate of Status Desired  City & State  Country  Zip  Country  Zip  Country  S. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  CARVALHO, JOSE V  11500 WESTWOOD BLVD., APT. 1624  ORLANDO FL 32821  83  84 City  FL  85 Zip Code  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 agent. I am familiar with, and accept the obligations of section 607.0505, Florida Statutes  SIGNATURE  Signature, byed or imited name of registered agent and it in it is applicable.  (NOTE: Registerered Agent algoritary required when reinstating)  DATE
23   28   28   28   29   29   20   20   20   20   20   20
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24 25 29 30 Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  CARVALHO, JOSE V  11500 WESTWOOD BLVD., APT. 1624  ORLANDO FL 32821  84 City  FL  85 Zip Code  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 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 white it applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE
P. Name and Address of Current Registered Agent  CARVALHO, JOSE V  11500 WESTWOOD BLVD., APT. 1624  ORLANDO FL 32821  81 Name JOSE V. CARVALHO  Street Address (P.O. Box Number is Not Acceptable)  11 Soo  83  84 City  FL  85 Zip Code  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 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, am familiar with, and accept the obligations of section 607.0505, Florida Statutes,  SIGNATURE  Signature, typed or proted name of registered agent arth utile if applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE
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Signature, typed or united name of registered agent art, title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D DELETE 1.1 TITLE Change Addition
NAME CARVALHO, JOSE V 1.2 NAME
STREET ADDRESS 11500 WESTWOOD BLVD., APT. 1624 1.3 STREET ADDRESS
CITY-ST-ZIP ORLANDO FL 32821 1.4 CITY-ST-ZIP
TITLE DELETE 2.1 TITLE Change Additio
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TITLE DELETE 6.1 TITLE Change Addition
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CITY-ST-ZIP  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 atteress.

2/6/98