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

PROFIT CORPORATION ANNUÁL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortifam

Secretary of State **DIVISION OF CORPORATIONS**

1. Corporation	MEN I # P970(I TRUCKING CORPORATIO	00036895 DN	(5)						
Principal Plac	ce of Business	Mailing Address		_					JUH DIN JUU
119 NW 48TH COURT MIAMI FL 33126		119 NW 48TH COURT MIAMI FL 33126				DO NOT WRITE IN THIS:	SPACE		
						3. Date Incorporated or Qualified 04/24/1997			
2. Principal F	Place of Business	├ ─┐	2a. Mailing Address 26			4. FEI Number 65 -0602792	-		plied For Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				\$8.		dditional
22	·	27				5. Certificate of Status Desired	F	ee Re	quired
City & Stat		City & State	8			6. Election Campaign Financing Trust Fund Contribution			May Be o Fees
Zip	Country	Zip	Cou	intry	,	8. This corporation owes or has paid the cur		_	
24	25 9, Name and Address of Curre	29 Agent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered	_ Yes		No
	ODRUGUEZ, JOSE A	nit Hogistorea Agent		81	Name	10. Harris and read on of feet ringerenes.	- goin		
119 NW 48TH COURT MIAMI FL 33126				82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
					Olicot Addit	ess (r.o. box (40/100/15 140/ Acceptable)			
				83					
					City	FL.	85	Zip C	ode
11. Pursuant office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obli	02 and 607.1508, Florida le of Florida. Such chang gations of, Section 607.0	Statutes, the at e was authorized 505, Florida Stat	DOVE d by utes	e-named corp the corporati	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	chang ointme	ing its	registered registered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable	(NOTE: Registered	d Age	nt signature require	ed when reinstating) DATE			
12.	OFFICERS A	ND DIRECTORS	13.		· · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND	_		
TITLE	PRESIDENT, SOSE A ROOPEI 11944 484 GO	Out 7	.,				L Cha	ange	☐ Addition
NAME STREET ADDRESS	JOSE A KOOK!	6062.	1.2 NA						
CITY-ST-ZIP	110000 4876 40	23126	1.3 ST		ADDRESS				
TITLE	January 1	DELI			1-20		Cha	inge	Addition
NAME	!		2.2 NA	ME					
STREET ADDRESS			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP			2. 4 CI		ST-ZIP		1 1 0		1 1 1 1200
TITLE NAME		DELE	3.1 TIT 3.2 NA		1		∐ Cha	inge	Addition
STREET ADDRESS				-	ADDRESS				
CITY-ST-ZIP			3.4. CI						
TITLE		☐ DELI					☐ Cha	ange	Addition
NAME			4. 2 N/	AME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP		Lores	4.4 CII		T-ZIP		T 65.		I Addition
TITLE		DELE	ſ				Cha	nige	Addition
NAME Street a ddress			5.2 NA 5.3 ST		ADDRESS			•	
CITY-ST-ZIP			5.4 CIT		•				
TITLE		DELE					Cha	noe	Addition

CITY+ST-ZIP 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 on an attachment with an address.

6.2 NAME

SIGNATURE: X

NAME

STREET ADDRESS

FILED

Mar 16 1998 8:00am

Secretary of State