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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF TATE

Sandra B. Mortham

FILED

Jun 08 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

MORTU	ARY TRANSPORT SERVI	CES CO.			
Principal Place	of Business	Mailing Address		1 (00010001 010 10111 60014 00011 00111 00111 001	IBB IIIII IUBIB IBIIO BIIIO IBII IUUI
420 WHITNEY AVENUE 420 WHITNEY AVENUE					
SUITE E SUITE E				DO NOT WRITE IN	TI HO DDAOE
LANTANA FL 33462				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal Pla	ice of Business	2a. Mailing Address		04/29/1997 4. FEI Number	Applied For
21		26		65-0747895	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			\$9.75 additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		26	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	
Zip	Country	Zφ.	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Curr		30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes Agon
7.5		ant negleteren Agent	81 Name	10. Name and Address of New Registe	neo Agent
	RILAWYER CHARTERED			TARTIN H. ALMA	W
	ALMERIA AVENUE IAL CABLES FL 33134		62 Street Add	ress (P.O. Box Number is Not Acceptable)	
COn	ML CHELES FL 33134		B3 6	1290 NE 19Ave	
			84 City No	M. Am. Kan a F.	FL 85 Zip Code
11, Pursuant to	the provisions of Sections 607 0	502 and 607.1508, Florida Statuto	es, the above-named corp	poration submits this statement for the purportion's board of directors. I hereby accept the	
office or re agent. I am	gistered age at or both, in the Sta Tarvillar with and accordable only	ito of Johndal Such change was a Johns of, Section 607,0505, Ffo	uthorized by the corpora	ition's board of directors. I hereby accept the	appointment as registered
SIGNATURE	WIST	the the	ARDA HI	A MANG SINGLE	2
	gnature, typed or printed has end regelles dis		Hegistered Agent signature requi	ired which reinstating)	Ri
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSTO	- 	1.1 TITLE		Change Addition
NAME	KENYON, JOHN M		1.2 NAME		
STREET ADDRESS	420 WHITNEY AVE, STE E		1.3 STREET ADDRESS		
CITY-ST-ZIP	CANTANA FE 33462	DELFTE	1.4 CITY - ST - ZIP		Channe D Addition
TITLE 7%	LUIS APONTO 1480 NO. M. AMI.	5 Dittil	2.1 TITLE		☐ Change ☐ Addition
NAME Street address	1430 NO. M. AMI.	Ave.	2 2 NAME		
CITY-ST-ZIP	M. an G 211	A7	2 3 STREET ADDRESS		
TITLE	V15	DELLE	2. 4 CHY-S1-ZiP 3.1 TITLE		Change Addition
	LAMERACO TORRAL		3.2 NAME		
STREET ADDRESS	AMIANO, JOSEAH. 1430 NO. MIANI A		3.3 STREET ADDRESS		
CITY-ST-ZIP	Miania Dina	We -	3.4. CITY - ST - ZIP		
TITLE	Miani, A JULY	DOLLETE	4.1 TULE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY-ST-7IP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6 1 TITLE	000002552:	Change Addition
NAME			62 NAME	-06/09/9801015	naa 04
STREET ADDRESS			6.3 STREET ADDRESS	were were dutied that dated	~ · · · • · · · · · · · · · · · · · · ·

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 open 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