

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

FILED

Mar 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000048329 (1)**

1. Corporation Name
LAKE HARRIS EXPRESS CORP.



Principal Place of Business 10261 WEST BROWARD BLVD PLANTATION FL 33324	Mailing Address 10261 WEST BROWARD BLVD PLANTATION FL 33324
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 27345 US 27		2a. Mailing Address 26		3. Date Incorporated or Qualified 06/02/1997	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 593487626	
City & State 23 Leesburg FL		City & State 28		5. Certificate of Status Desired 8.75 Additional Fee Required	
Zip 24 34748		Country 25 US		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> 5.00 May Be Added to Fees	
29		30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent COSTELLO, JAMES J 10261 WEST BROWARD BLVD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
85 Zip Code				FL	

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  **James J Costello Jr** **3/4/98**
Signature, typed or printed name of registered agent and 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	<input type="checkbox"/> DELETE		1.1 TITLE	D, President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	COSTELLO, JAMES J JR			1.2 NAME	Costello, James J Jr.		
STREET ADDRESS	10261 WEST BROWARD BLVD			1.3 STREET ADDRESS	700 NW 100TH TRANCE		
CITY-ST-ZIP	PLANTATION FL 33324			1.4 CITY-ST-ZIP	Plantation, FL 33324		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	D, VP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				2.2 NAME	Cook, Kevin C.		
STREET ADDRESS				2.3 STREET ADDRESS	13080 NW 5TH ST.		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	Plantation FL 33325		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	D, Treasurer	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				3.2 NAME	Miller, Terel M.		
STREET ADDRESS				3.3 STREET ADDRESS	9830 SW 15TH DRIVE		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	DAVIE FL 33324		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	D, Secretary	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				4.2 NAME	Costello James J SR.		
STREET ADDRESS				4.3 STREET ADDRESS	6801 NW 6 CT		
CITY-ST-ZIP				4.4 CITY-ST-ZIP	Plantation, FL 33317		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
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 address.

SIGNATURE:  **James J Costello Jr** **3/11/98** **954-423 9030**

CR2E034 (10/97)