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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P9700054834 (1)

Block 12 or Block 13 if changed, or on an attachment with an address

Petra S. Wright

RELIABLE TRUCK TRANSPORT, INC.

Principal Place of Business

Mailing Address

FILED Feb 11 1998 8:00am Secretary of State



1-26-98

150 SOUTH ANDREWS AVE 150 SOUTH ANDREWS AVE 2ND FLOOR 2ND FLOOR DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 3. Date Incorporated or Qualified 06/23/1997 2. Principal Place of Business Applied For Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. 半103 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 23 Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 30 25 28 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 Wr16 h Name Pe ተሰ Street Addyess (P.O. Box Numb 82 83 84 City Wood 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 Jamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.

NATURE Typed or provide name of registere I harrint and to our applicable (NOTE: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE TITLE Sherildan Street #103 WRIGHT, PETRA NAME 12 NAME 160 SOUTH ANDREWS AVE, 2ND FLOOR 1.3 STREET ADDRESS STREET ADDRESS Hollywood, Fr POMPANO BEACH FL 33069-14 CITY-ST-ZIP CITY - ST - ZIP DELETE 21 TITLE TITLE GARTHWAIT, MERRILL C 22 NAME NAME 150 SOUTH ANDREWS AVE, 2ND FLOOR STREET ADDRESS 23 STREET ADDRESS POMPANO BEACH FL 33069 CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE TITLE 32 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS CITY - S! - ZIP 3 4. CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4 1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5 1 TITLE Change TITLE 52 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY - ST - ZIP Change Addition TITLE DELETE 61 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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