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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000059194 (5)

NEWELL TRANSPORT, INC.

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		E 1901/001 NO LOCAL LOCAL COLLEGE DONN CONTROL CANDIDATE STATE AND A 1911/ OLDS 1591
9205 RAMBLEWOOD DRIVE SUITE 822	9205 RAMBLEWOOD DRIVE SUITE 822		DO MOT WANTE IN THIS COLOR
CORAL SPRINGS FL 33071	CORAL SPRINGS FL 33071		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified 07/08/1997
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
	8825 RAMBLEL	UCOD DR	4. FEI Number Applied For Not Applicable
Suite Ant # otc	Suile, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
	SUITE ISIL		Fee Required
City & State 23 CURAL SPRINGS	City & State CORAL SPRIA	145	8. Election Campaign Financing \$5.00 May Be
Zip CORAL SPRINGS		intry	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intendible
一 コー33 <i>の</i> /m 1/(ルート	7 L-33071 30	USA	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Re		T	10. Name and Address of New Registered Agent
AMERILAWYER CHARTERED 81 N			LLEN NEWELL
343 ALMERIA AVENUE		82 Street Ad	dress (P.O. Box Number is, Not Acceptable)
CORAL GABLES FL 33134		8	825 RATABLEWOOD DZ #1512
		83	
		84 City	SPRINGS FI 85 Zip Code
44 Description of Costs (Costs)	of CO2 1659 Floredy Cintutes the o		TERL OT ALL STATES
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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.			
SIGNATURE Signal for, typical or profited from a cit frequency agent and	ALLEN R. NEU	1EHL	pured when re-installing) DATE
Stgnat re, typed or period out and all registered agent as 12. OF EICLES AND DE		d Ageni signalure req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PSTD	DELETE 11T	TLE	Mac Change ☐ Addition
NAME NEWELL, ALLEN R	1.2 N	AME	
STREET ADDRESS 9205 RAMBLEWOOD DRIVE	1.3 \$	TREET ADDRESS	BRZYRAMBLE WOOD DR , SUITE ISN
CITY-ST-ZIP CORAL SPRINGS FL 33071		ITY-ST-ZIP	CORAL SPRINGS 7 L 33071
TITLE	DELETE 21T	TLE	Change Addition C
NAME	22 N	AME	
STREET ADDRESS		TREET ADDRESS	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	HTY-ST-ZIP	☐ Change ☐ Addition
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NAME STREET ADDRESS		TREE 1 ADDRESS	1
CITY - ST - ZIP		HTY-ST-ZIP	i i
TITLE	DELEJE 41 T		Change Addition
NAME	4.21	IAME	
STREET ADDRESS	1 4.3 S	THEET ADDRESS	
CITY-ST-ZIP	4.4 C	ITY-ST-ZIP	
TITLE	DELETE 5.1 TO		Change Addition
NAME	5.2 N	AME	
STREET ADDRÉSS	5.3 \$	TREET ADDRESS	
CITY-ST-ZIP		TY-ST-ZIP	
TITLE	☐ DELETE 61T		Change Addition
NAME	62 N		ļ
STREET ADDRESS		THEET ADDRESS	
City-St-ZiP		TY-ST-ZIP	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

r nereby certify that the information state in section 1907(3)(i), Florida Statutes. 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 this corporation or the receiver or frustee 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:

ALLENR NEWEW 2/9/88

954 255-6038