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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000059661 (3)

MIRANDA TRUCKING, INC

FILED Apr 21 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			
941 E 15 PLACE		941 E 15 PLACE			
HIALEAH FL 33010		HIALEAH FL 33010			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
A Delevie of Div	ace of Business	2a, Mailing Address	Mailing Addrone		07/09/1997 4. FEI Number Applied For
—	ace of Business	} i			4. FET Number Applied For Not Applicable
21 Suite, Apt. #	t etc	Suite, Apt. #, etc.			_ \$8.75 Additional
	7, 610.	₁			5. Certificate of Status Desired Fee Required
City & Stale		City & State			Election Campaign Financing \$5.00 May Be
-		28			Trust Fund Contribution
Zip	Country	Z(p			This corporation owes or has paid the current year Intangible
24	25 29 30		F¬1	,	Personal Property Tax due June 30. Yes No
Name and Address of Current Register					10. Name and Address of New Registered Agent
140	ANDA, CHARLES	· · · · · · · · · · · · · · · · · · ·	8	1 Name	
941 E 15 PLACE			-		(DO D. Harris Markers Help)
			82 Street Ad		Address (P.O. Box Number is Not Acceptable)
A DIA	LEAH FL 33010		8	3	
-E					
1			8-	4 City	FL 85 Zip Code
W	10.10.10.10.10.10.10.10.10.10.10.10.10.1	00	latutas the obs		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Horida 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 Signature: Typind or printed harmonal registered agreal and their fleopticable: (NOTE Registered Agent signature required when reinstailing) DA1E					
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 DILE		Change Addition
NAME	MIRANDA, CHARLES		1.2 NAMI	<u>.</u>	
STREET ADDRESS	941 E 15 PLACE		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33010		1.4 CITY	- \$1 - 7IP	
TITLE	D	DLLETE			. Change Addition
NAME	MIRANDA, TERESA		2.2 NAM	ŧ l	,
STREET ADDRESS	941 E 15 PLACE			T ADDRESS	
·	HIALEAH FL 33010		2. 4 CITY		• • • •
CITY-ST-ZIP TITLE	THE COULT	DITETE			Change Addition
NAME			3.2 NAM		
				ET ADDRESS	
STREET ADDRESS					
CiTY-\$1-ZIP		DELETE	3.4. CITY 4.1 7(1)		Change Addition
TITLE					
NAME			4. 2 NAM		
STREET ADDRESS				ET ADORESS	
CITY-ST-ZIP		DECERE	4.4 CHY		Change Addition
TITLE		☐ DELETE			Change (Adultion
NAME			5.2 NAM		
STREE ADDRESS				et address	
CITY-ST-ZIP	<u> </u>		5.4 CITY		There I have -
TITLE		☐ DETEAR	6.1 1111.6		
NAME			6.2 NAM	ξ	
STREET ADDRESS			6.3 S1RE	ET ANDRESS	
CITY-ST-ŽIP			6.4 CITY	- \$1 - ZIF*	
14. I hereby c	ertify that the information supplied	with this filing does not qua	lify for the exem	ption state	ed 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 of the receiver or trusted 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 of hin attachment with an addiges.					
	$\alpha \alpha \nu$	1	→	/ ,	45 1 3/4/20 (300) 800 -11262