PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90188 045 ***150.00

DOCUMENT # **P97000069475**1. Corporation Name

BJ'S TRANSPORT SERVICES, INC.

	Carrie Ca				- <u></u>		
Principal'Plac	e of Business	Mailing Address				1 100 1100 to 10 10 10 10 10 10 10 10 10 10 10 10 10	
12895 AUTOMO	BILE BLVD.	12895 AUTOMOBILE BLVD.					
CLEARWATER I	FL 33758	CLEARWATER FL 33758	CLEARWATER FL 33758			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	٦
	•					08/11/1997	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26 P.O. BOX 4	981			59-3461725 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22		27				ree Required	4
City & Stat		City & State		1	U	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
23	Country	28 Clearwate	1 Co	untry		8. This corporation owes the current year intangible	┪
Zip	25	29 33758		úŚ	A	Personal Property Tax.	
24	9. Name and Address of Current	<u> </u>	30 1	7		10. Name and Address of New Registered Agent	1
				81	Name		ļ
HAWORTH, JONATHAN				82	Stropt Add	dress (P.O. Box Number is Not Acceptable)	-
	95 AUTOMOBILE BLVD.			52 Street Addi		diess (F.O. Dox Number is Not Acceptable)	
CLE	ARWATER FL 33758			83			
	•			84	City	85 Zip Code	
					•	FL	
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statut	tes, the	above	-named corp	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
office or r agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Fig	rida Sta	itutes.	ule corporati	Holls board of directors. Thereby accept the appointment do regional	
SIGNATURE							-
			 -	t signature requir	red when reinstating) DATE ARRESTORS OF TAXABLE PURE TARRESTORS IN 12 (⊣ į́	
12.	OFFICERS AND	DELETE	13	TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	,n ;
TITLE	DP Haworth, Jonathan			NAME	}		
NAME	12895 AUTOMOBILE BLVD.				ADDRESS		6
STREET ADDRESS	CLEARWATER FL 33758				1		1 3
CITY-ST-ZIP	DVST	☐ DELETE		CITY-ST TITLE	1-217	☐ Change ☐ Addition	<u>,</u>
TITLE	HAWORTH, CHRISTINE			NAME			-
NAME STREET ADDRESS	JOSOF ALITOMODILE BUILD				ADDRESS		
	CLEARWATER FL 33758		- 6	CITY-S			
CITY-ST-ZIP TITLE	OLLANDATENTE 33730	☐ DELETE		TITLE	1-21	☐ Change ☐ Addition	»n
NAME		_	3.21	NAME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP				CITY-S			ſ
TITLE		☐ DELETE	_	TITLE		☐ Change ☐ Addition	nc
NAME			4. 2	NAME		•	1
STREET ADDRESS			4.3	STREET	ADDRESS		
CITY-ST-ZIP				CITY-ST	1		
TITLE		☐ DELETE	_	TITLE		☐ Change ☐ Addition	n
NAME 3		·• •• •	521	NAME .		the state of the s	
STREET ADDRESS	İ		5.3	STREET	ADDRESS	and the same of the state of the same of t	-
CITY-ST-ZIP			5.4	CITY-ST	r-ZIP		_
TITLE		☐ DELETE	6.1	TTTLE		☐ Change ☐ Addition	пс
NAME			6.21	NAME			
CTDEET ADDDESS			6.3	STREET	ADDRESS		l l

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 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 on any attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP