

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000072142

1. Corporation Name  
ONE STOP TRUCK STOP CORP.

Principal Place of Business  
9455 N.W. 109TH STREET  
SUITE 201  
MEDLEY FL 33178

Mailing Address  
9455 N.W. 109TH STREET  
SUITE 201  
MEDLEY FL 33178

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28

Country

24

25

29

Zip

9. Name and Address of Current Registered Agent

ALVAREZ, JUAN C  
9455 N.W. 109TH STREET  
SUITE 201  
MEDLEY FL 33178

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

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 PTD  
NAME ALVAREZ, JUAN C  
STREET ADDRESS 10210 N.W. 130TH STREET  
CITY-ST-ZIP HIALEAH GARDEN FL 33018

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change  Addition

TITLE VSD  
NAME RODRIGUEZ, MARIA M  
STREET ADDRESS 10280 N.W. 129TH STREET  
CITY-ST-ZIP HIALEAH GARDEN FL 33018

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change  Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90231 017 \*\*\*150.00

0257155



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1997

4. FEI Number

65-0775447

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

7. This corporation owes the current year Intangible Personal Property Tax.

Yes  No

CR2E034 (11/98)