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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000104614 (7)

FILED May 22 1998 8:00am Secretary of State

SUUTHTLA TRANSPORT SERVICES, INC.				
Principal Place of Business	Mailing Address		-{	1 771 - 1188 - 1 178 - 11 8 1 - 118 1 - 1 18 1
8000 S. ORANGE AVENUE SUITE 206	8000 S. ORANGE AVENUE	CHITE SOC		
ORLANDO FL 32859 ORLANDO FL 32859		OUTIE 200	DO NOT WOITE IN THIS	5 6040C
			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
2. Principal Place of Business	2a. Mailing Address	·	12/11/1997 4. FEI Number	Applied For
21 8000 S. Orange Ave	26 P. O. Box	590433	59-3482072	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 Suite 208 ^	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Orlando, FL	28 Orlando, F		Trust Fund Contribution	Added to Fees
Zip Country	7ιρ	Country	8. This corporation owes or has paid the c	
24 32809 25 Orange		0 Orange	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current	Hegistered Agent	B1 Name	10. Name and Address of New Registered	3 Agent
MANN, GARY M		Ma	nn, Gary M.	
8000 S. ORANGE AVENUE SUITE 206 ORLANDO FL 32859 83		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
			12 Commander Drive	
		°3 #1	722	
		84 City		85 Zip Code
Orl 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpor			lando Fi	
office or registered agent, or both, in the State of	f Fiorida. Such ch ange w as au	thorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing its registered
agent. I am familiar with, and accept the obligat	ions of, Section 607.0505, Flori	da Statules.	, , ,	
SIGNATURE Signature, typied or printed minic of registered agent	0.077	Registered Agent signature requir	red when reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE D	DELETE	1.1 TillE D	ACCUMENTATION OF THE CONTROL OF THE	XX Change Addition
NAME MANN, GARY M		1.2 NAME Ma	nn, Gary M.	
STREET ADDRESS 8000 S. ORANGE AVENUE S	LITE 208		O. Box 590433	
CITY-ST-ZIP ORLANDO FL 32859	011C 200		lando, FL 32859 /	V/A
TITLE	DELETE	2.1 TITLE	1011001 10 22032 1	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP		
TITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3 2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		1
CITY-ST-ZIP		4.4 City-St-ZiP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY+ST+ZIP		
CITY-ST-ZIP TITLE	☐ DELETE	5.4 CITY+\$T-ZIP 6.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	☐ DELETE	5.4 CITY+ST+ZIP 6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP TITLE	DELETE	5.4 CITY+\$T-ZIP 6.1 TITLE		Change Addition

indicated on this annual report or supplies that his limit does not quality for the exemption stated in 1980/07, honder states. Hunter behalf that the limit indicated on this 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. , 24.98