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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90032 031 ***158.75

DOCUMENT # P9800005375

1. Corporation Name

Principal Place of Business

SASSY TRANSPORTATION, INC.

123 WOODFERN DR. WINTER HAVEN FL 33881		123 WOODFERN DR. WINTER HAVEN FL 33881			·
MINISTER INVALEN	12 33001	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 01/16/1998
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
170	Lake Stella DR	26 P. O. Box	151	6	65-0806053 Not Applicable
Suite, Apt. i		Suite, Apt. #, etc.	,		\$8.75 Additional
22 unit	· ·	27			5. Certificate of Status Desired X Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Auburndale, FL		Auburndale, FL			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible
3382	3 25	29 33823 30	29 33823 30		Personal Property Tax. ~~ QYes No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
			81	Name	Carmen L. Sasser
	SER, CARMEN L		82	Street	Address (P.O. Box Number is Not Acceptable)
	WOODFERN DR.			3	170 Lk Stella Dr
WINT	TER HAVEN FL 33881		83		TIO BY OCCITA DE
			-	<u> </u>	
			84	City .	Auburndale FL 33823
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abov	e-named	comparation submits this statement for the purpose of changing its registered
office or registered agent, I am familia) with, and accept the obligations of Section 607.0505, Florida Statutes, the above-tamed corporation's board of directors. I hereby accept the appointment as registered agent. I am familia) with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered age)	at and title if applicable. (NOTE: Re-	gistered Age	rit signature r	required when reinstating) DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		D/P Addition
NAME	SASSER, CARMEN L		1.2 NAME		Carmen L. Sasser
STREET ADDRESS	123 WOODFERN DR		1.3 STREE	TADORESS	170 Lk Stella DR, Unit #1
CITY-ST-ZIP	WINTER HAVEN FL 33881		1.4 CITY-5		Auburndale, FL 33823
TITLE		☐ DELETE	2.1 TITLE	S/T	Carol Gilmore Change Addition
NAME			2.2 NAME	-, -	3020 Spririt Lk Dr.
STREET ADDRESS	•				Winter Haven, FL 33882
		·	2. 4 CITY-		Winter Haven, FL 33002
CITY-ST-ZIP		☐ DELETE	3.1 TITLE	<u> </u>	. Change Addition
NAME			3.2 NAME		
		*	-	T ADDRESS	
STREET ADORESS			3.4. CITY-		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	O F- ZIF	☐ Change ☐ Addition
			4, 2 NAME	:	
NAME	,	,	L	Et address	
STREET ADDRESS					·
CITY-ST-ZIP		☐ DELETE	4.4 CITY-	31-2110	☐ Change ☐ Addition
TITLE '		LI VILLIL	5.2 NAME		
NAME				ET ADDRESS	,
STREET ADDRESS	• •		5.4 CITY-		1
CITY-\$T-ZIP	<u> </u>	☐ DELETE	6.1 TITLE	31-41 ^r	Change [] Addition
TITLE '	<i>:</i>	רין הברבוב			, Crossing (2) Addition
NAME		•	6.2 NAME		
STREET ADDRESS			6.3 STREE	ET ADDRESS	

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 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.

6.4 CITY-ST-ZIP

SIGNATURE: