

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

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

03-01-1999 90079 013 ***158.75

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DOCUMENT # P98000015126

1. Corporation Name

PIC AUTO TRANSPORT, INC.



Principal Place of Business

3100 OLD WINTER GARDEN ROAD
APT. 122
OCOE FL 34761

Mailing Address

3100 OLD WINTER GARDEN ROAD
APT. 122
OCOE FL 34761

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/05/1998

4. FEI Number

59-3503397

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

Yes No

2. Principal Place of Business

21 192 LANSBROOK CT

Suite, Apt. #, etc.

2a. Mailing Address

26 192 LANSBROOK CT

Suite, Apt. #, etc.

City & State

23 OCOEE FL

Zip Country

24 34761 25 ORANGE

City & State

28 OCOEE FL

Zip Country

29 34761 30 ORANGE

9. Name and Address of Current Registered Agent

GODBEY, GLADYS
3100 OLD WINTER GARDEN ROAD
APT. 122
OCOE FL 34761

10. Name and Address of New Registered Agent

81 Name

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

192 LANSBROOK COURT

83

84 City OCOEE

FL

85 Zip Code 34761

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

TITLE DP
NAME GODBEY, GLADYS
STREET ADDRESS 3100 OLD WINTER GARDEN ROAD, APT. 122
CITY-ST-ZIP OCOEE FL 34761

TITLE D
NAME GODBEY, J.R.
STREET ADDRESS 3100 OLD WINTER GARDEN ROAD, APT. 122
CITY-ST-ZIP OCOEE FL 34761

TITLE DV
NAME MOSELEY, FRED
STREET ADDRESS 3200 OLD WINTER GARDEN ROAD, APT. 2114
CITY-ST-ZIP OCOEE FL 34761

TITLE DST
NAME MOSELEY, BETSY
STREET ADDRESS 3200 OLD WINTER GARDEN ROAD, APT. 2114
CITY-ST-ZIP OCOEE FL 34761

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME GLADYS GODBEY
1.3 STREET ADDRESS 192 LANSBROOK COURT
1.4 CITY-ST-ZIP OCOEE FL 34761

2.1 TITLE D
2.2 NAME J.R. GODBEY
2.3 STREET ADDRESS 192 LANSBROOK COURT
2.4 CITY-ST-ZIP OCOEE FL 34761

3.1 TITLE DV
3.2 NAME FREDERICK MOSELEY
3.3 STREET ADDRESS 424 SADDLE BAY LOOP
3.4 CITY-ST-ZIP OCOEE FL 34761

4.1 TITLE DST
4.2 NAME BETSY MOSELEY
4.3 STREET ADDRESS 424 SADDLE BAY LOOP
4.4 CITY-ST-ZIP OCOEE FL 34761

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

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

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.

SIGNATURE:

GLADYS GODBEY

1-15-99

407-654-4456

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)