PROFIT CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOCOCOCEGO

HERB'S	TRANSPORTATION SERVICE	E, INC.						
Principal Place		Mailing Address						
618 NORFOLK ST 618 NORFOLK ST DUNEDIN FL 34698 DUNEDIN FL 34698								
DUNEDIN FL 34	63 6	DONEDNI FL 34030			DO NOT WRITE IN THI	3 SPACE		
					3. Date Incorporated or Qualifed			
]					03/31/1998			l
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	of ed For	[
21		26			59-3518213		Applicable	1
Suite, Art.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 A Fee Re		
22		City & State			6 Floring Council Einensing	\$5.00		
City & State	3	⊢ ′			6. Electior Campaign Financing Trust Fund Contribution	Added to	,]
23 Zin	Zip Country Zip		Country		8. This corporation owes the current year i			
24	[25]		30	•	Person al Property Tax.	Yes	INO	ĺ
24	9. Name and Address of Current	. 1 	1		10. Name and Address of New Registere	i Agent		
		- 	81	1 Name				
	IUP, HERBERT ALLEN		82	2 Street Addre	ess (P.O. Box Number is Not Acceptable)			ĺ
618 NORFOLK ST				000000000000000000000000000000000000000				
DUN	EDIN FL 34698		83	3				İ
}			84	4 City		85 Zip C	ebe	1
•				1 '	<u> </u>	<u>L I I I I I I I I I I I I I I I I I I I</u>		
i	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statute f Florida. Such change was nu ons of, Section 607.0505, Fkmi	s, the above thorized by da Statute	ve-named corpor y the corporations s,	oration submits this statement for the purpose on's board of cirectors. I hereby accept the appropriate the purpose of the purpose on's board of cirectors. I hereby accept the appropriate the purpose of the purpose o	or changing its cointment as reg	stered	
SIGNATURE	Jebert 2 July Signature, typed or printed na ne of registered agent	and talk if applicable (NOT in	Registered Age	ent signature required				a
12.	OFFICERS AND	DIRECTORS	13,		ADDITIONS/CHANGES TO OFFICERS			R2E034 (11/98)
TITLE	President lown	□ DELETE	1.1 TITLE	l .		Change	Addition (5
NAME	HERBERT A. GUINUP		1.2 NAME				ľ	3
STREET ADDRESS	TREET ADDRESS 618 NORFOIR STreet		13 STREET ADDRESS					Į.
CITY-ST-ZIP	Dunedin FL 34698			1			ĺ	()
	Duneain FL	34698	1.4 CITY-	ST-ZIP		D) Change	FT Addition	CR2
TILE	Buneain FL	341698	1.4 CITY-1 21 TITLE	ST-ZIP		Z] Change	Addition	CR2
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14. There by certify that the information supplied with this filling does not qualify or the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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

CITY-ST-ZIP

800-736-1087

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90073 004 ***158.75