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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000034036
DOCOMENT #	F30000034030

	MENT # P98000 GONE TRUCKING, INC.	034036						
Principal Place	of Business	Mailing Address				- CANDILANI (IN INIU) ANII ANII ANII ANII ANII ANII ANII ANI	TI GOIGE SITTI GIBIT GO	102 11110 0111 1061
33330 ROWNTRI		33330 ROWNTREE DRIVE				} .		
RIDGE MANOR	= -	RIDGE MANOR FL 33523					· · · - · · - · · - · · - · · · · ·	
						DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualifed 04/14/1998		
2. Principal Pl	ace of Business	2a. Mailing Address				4, FEI Number	├	Applied For
21		26				59-3505606		Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional
22		27						Required
City & State	1	City & State				6. Election Campaign Financing	•	May Be
23		28				Trust Fund Contribution		d to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes the current ye		□No
24	25	29 3	0]			Personal Property Tax. 10. Name and Address of New Regis	X Yes	
	9. Name and Address of Curre	nt Registered Agent	-	81 Name		10. Name and Address of New Regis	resea Agent	
HOY	MARVIN			o i i i i i i i				
	FAIRWAY DRIVE		[-	82 Street	Addre	ss (P.O. Box Number is Not Acceptable)		
	E MANOR FL 33523			83				
HIDO	E WANTE SOSES			53				
				84 City			FL	p Code
office or re agent. I ar	o the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was auth	horized	by the con	l corpo coration	ration submits this statement for the purp o's board of directors. I hereby accept the	appointment as	registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: R	egistered A	igent signature	required	when reinstating) Da	ATE	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		
TITLE		☐ D€LETE	1.1 TITL	E	P		☐ Chang	je 🔀 Addition
NAME			1.2 NAME		_	ARRY HOY		
STREET ADDRESS	1.3.5					3330 ROWNTREE_DRIV		
CITY-ST-ZIP			1.4 CIT	Y-ST-ZIP	R.	IDGE MANOR, FL 335:		
TITLE		☐ DELETE	2.1 TITL	E			Change	e
NAME	22%		2.2 NAME					
STREET ADDRESS			2.3 STR	EET ADDRESS	; [Į
CITY-ST-ZIP		2.4		Y-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			•	☐ Chang	je 🗌 Addition
NAME			3.2 NAM	Æ			,	
STREET ADDRESS			3.3 STF	EET ADDRESS	3			
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITL	.E			☐ Chang	ge 🗌 Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	EET ADDRESS	s			
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP		<u> </u>		
TITLE	•	☐ DELETE	5.1 TITL	E			Chang	ge 🔲 Addition
NAME			5 2 NAM	ΜE				
STREET ADDRESS			5.3 STF	REET ADDRESS	3			Ì
CITY-ST-ZIP				Y-ST-ZIP	1			
TITLE			61 TITL	Æ	1		Chang	e 🗌 Addition

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 truetee 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

352-<u>583-0341</u>