

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

99 APR 20 PM 12:05

DOCUMENT # P98000046383

1. Corporation Name
T & S TRUCKING USA INCSTATE
TALLAHASSEE, FLORIDA

Principal Place of Business P.O. BOX 37 WAUCHULA FL 33873	Mailing Address P.O. BOX 37 WAUCHULA FL 33873
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 3/11/99 91230/036 \$150.00
 DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/22/1998	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65 0840 365		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No			
8. Name and Address of Current Registered Agent TALLEY, TERRY 332 N. 4TH AVE. WAUCHULA FL 33873			10. Name and Address of New Registered Agent		
			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City FL 85 Zip Code		

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 fee if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change ☐ Addition ☐
NAME	NAME	1.2 NAME	
STREET ADDRESS	STREET ADDRESS	1.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	1.4 CITY-ST-ZIP	Change ☐ Addition ☐
TITLE	NAME	2.1 TITLE	Change ☐ Addition ☐
NAME	NAME	2.2 NAME	
STREET ADDRESS	STREET ADDRESS	2.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	2.4 CITY-ST-ZIP	Change ☐ Addition ☐
TITLE	NAME	3.1 TITLE	Change ☐ Addition ☐
NAME	NAME	3.2 NAME	
STREET ADDRESS	STREET ADDRESS	3.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	3.4 CITY-ST-ZIP	Change ☐ Addition ☐
TITLE	NAME	4.1 TITLE	Change ☐ Addition ☐
NAME	NAME	4.2 NAME	
STREET ADDRESS	STREET ADDRESS	4.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	4.4 CITY-ST-ZIP	Change ☐ Addition ☐
TITLE	NAME	5.1 TITLE	Change ☐ Addition ☐
NAME	NAME	5.2 NAME	
STREET ADDRESS	STREET ADDRESS	5.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	5.4 CITY-ST-ZIP	Change ☐ Addition ☐
TITLE	NAME	6.1 TITLE	Change ☐ Addition ☐
NAME	NAME	6.2 NAME	
STREET ADDRESS	STREET ADDRESS	6.3 STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	6.4 CITY-ST-ZIP	Change ☐ Addition ☐

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 fee empowered.

SIGNATURE: Terry Talley

3-2-99

741 9574

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2004 (1/98)