PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # P98000073880

FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State DIVISION OF CORPORATIONS 1999

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90098 032 ***150.00

IBC IHA	ANSPORTATION, INC.									
Principal Place	e of Business	Mailing Address	1							
7249 MIMOSA GROVE TRAIL		7249 MIMOSA GROVE TRAI	L i							•
JACKSONVILLE FL 32210		JACKSONVILLE FL 32210					DO NOT WRITE	IN THIS	SPACE	
						3. Date incorpor				
						08/24/1998	3			
2. Principal P	lace of Business	2a. Mailing Address	7			4. FEI Number	-2011	2		Applied For
21		26	<u> </u>			99-3	53046	<u> </u>		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of S	tatus Desired	. .		Additional Required
22		27		-			neine Flactacine			D May Be
City & Stat	e	City & State	-			6. Election Came Trust Fund Co		_		1 to Fees
Zip	Country	28 Zip	Cour	ntrv			on owes the current	year Inta		
24 ZIP	25		30	•		Personal Prop			☐ Yes	ZHO"
4-1	9. Name and Address of Current					10. Name and Ad	idress of New Rec	istered A	gent	
		 		81	Name					
	RY, WILLIAM C		}	82	Street Add	dress (P.O. Box Numb	er is Not Acceptable)	-	
7249 MIMOSA GROVE TRAIL			į	Ш				·		
JACH	KSONVILLE FL 32210		ſ	83						
			}	84	City				85 Z	Code
		•	l l	171	4,			FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statule	es, the ab	DOVE-I	named cor	rporation submits this s	statement for the pu	rpose of c	hanging i Iment as	ts registered registered
office of r agent. I a SIGNATURE	egistered agant, or both, in the State of m familiar with, and accept the obligation of the college of the coll	long of Section 607.0505 Flor	rida Statu	ites.	· ·	ared when reinstating)	4-	3-9	9	
office or r agent. I a SIGNATURE	egistered agant, or both, in the States in familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AN	Land the Report NATE	Registered	ites.	elgnature requ	ADDITIONS/CI	HANGES TO OFFIC	3-9 DATE CERS AND	9 DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12.	egistered agant, or both, in the States in familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AN	long of Section 607.0505 Flor	Registered 13.	Agent o	elgnature requ	ADDITIONS/CI	HANGES TO OFFICE	3-9 DATE CERS AND	DIRECT	ORS IN 12
office of ragent. I a SIGNATURE 12. TITLE NAME	egistered agant, or both, in the States in familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D LEARY, SEAN B	Land the Report NATE	Registered 13.	Agent o	egrature requ	ADDITIONS/CI	HANGES TO OFFICE	3-9 DATE CERS AND	DIRECT	ORS IN 12
Office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agant, or both, in the States of m familiar with, and accept the obligation of the college of the col	Land the Report NATE	Registered 13. 1.1 TIT 12 NAI 1.3 STI	Agent of	DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT	ORS IN 12
Office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY: 51-2P	Signature, typed or printed name of registered eigent to obligate of the college	Land the Report NATE	Registered 13. 1.1 TIT 12 NAI 1.3 STF	Agent of	DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT	ORS IN 12
Office of ragent. I a gent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	Signature, typed or printed name of registered eigent Signature, typed or printed name of registered eigent OFFICERS AND D LEARY, SEAN B 7633 WILSON BLVD., LOT #47 JACKSONVILLE FL 32210 D	Inne of Section 607.0505 Fig.	Registered 13. 1.1 TIT 12 NAI 1.3 STI	Agent of Age	DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12
Office or regent. I a signature 12. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME	egistered agant, or both, in the States of m familiar with, and accept the obligation of the college of the col	Inne of Section 607.0505 Fig.	Registered 13. 1.1 TIT 12 NAI 1.3 STT 1.4 CIT 2.1 TITE 2.2 NAI	Agent e Agent e ME REET AI TLE ME	DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12
Office of ragent. I a gent. I a signature 12. TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent for the obligation of the college of the co	Inne of Section 607.0505 Fig.	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STF	Agent e Agent e ME REET AI TLE ME	DORESS DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12 ORS Addition
Office or regent. I a signature 12. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME	egistered agant, or both, in the States of m familiar with, and accept the obligation of the college of the col	Inne of Section 607.0505 Fig.	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STF	Agent of Age	DORESS DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12 DE Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	Signature, typed or printed name of registered agent for the obligation of the college of the co	Inne of Section 607.0505 Flor and the Exercises DIRECTORS DELETE	13. 1.1 TITI 12 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 2	Agent of Age	DORESS DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12 DE Addition
Office of ragent. I a gent. I a signature 12. TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE	Signature, typed or printed name of registered agent for the obligation of the college of the co	Inne of Section 607.0505 Flor and the Exercises DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 NAI TITI 3.2 NAI 3.3 NAI 1.4 CIT 3.3 NAI TITI 3.2 NAI 1.4 CIT 3.1 TITI 3.2 NAI 1.4 CIT 3.4 CIT 3.1 TITI 3.2 NAI 1.4 CIT 3.4 CIT 3.1 TITI 3.2 NAI 1.4 CIT 3.4	Agent a Agent	DORESS DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12 DE Addition
Office of ragent. I a gent. I a signature 12. TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered agent for the obligation of the college of the co	Inne of Section 607.0505 Flor and the Exercises DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 14 CIT 22 NAI 23 STF 2.4 CIT 3.1 TIT 32 NAI 33 STF 34 S	Agent a Agent	DORESS ZP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent for the obligation of the college of the co	Inne of Section 607.0505 Flor and the Exercises DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 14 CIT 22 NAI 23 STF 2.4 CIT 3.1 TIT 32 NAI 33 STF 34 S	Agent a Agent	DORESS ZP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	DIRECT Change	ORS IN 12 Del Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP CITY-ST-ZP CITY-ST-ZP CITY-ST-ZP	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAI 3.3 STF 3.4 CIT 3.5 CIT 3.4 CIT 3.4 CIT 3.4 CIT 3.5 CIT	Agent a Agent	DORESS ZP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 14 CIT 22 NAI 23 STF 2.4 CIT 3.1 TIT 32 NAI 33 STF 34 CIT 4.2 NAI 5.3 NA	Agent of Age	DORESS ZP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent for the obligation of the college of the co	Land the Exposure (NOTE) D DIRECTORS DELETE DELETE	Registered 13. 1.1 TIT 12.NA 1.3 STT 1.4 CIT 2.2 NA 2.3 STT 2.4 TIT 1.4 CIT 3.2 NA 4.3 STT 4.4 CIT 4.4	ADDRESS ADDRES	DORESS ZP DORESS ZP DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STT 1.4 CIT 2.2 NAI 2.3 STT 2.1 TIT 3.2 NAI 3.3 STT 3.4 CIT 4.2 NAI 4.3 STT 4.2 NAI 4.3 STT 4.2 NAI 4.3 STT 4.2 NAI 4.3 STT 4.4 CIT 5.1 TIT	Agent a Agent	DORESS ZP DORESS ZP DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. Title Name STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent for the obligation of the college of the co	Land the Exposure (NOTE) D DIRECTORS DELETE DELETE	13. 1.1 TITI 12 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.2 NAI 5.3 TITI 5.3 TITI 5.3 NAI 5.3 TITI 5.3 TITI 5.3 NAI 5.3 TITI 5.	Agent a Agent	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a gent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent for the obligation of the college of the co	Land the Exposure (NOTE) D DIRECTORS DELETE DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAI 3.3 STF 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STF 5.3 STF 5.3 STF 5.3 STF 5.3 STF	Agent a Agent	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	H- HANGES TO OFFIC L. LEAR LASA GROV L. FLS	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change	TORS IN 12 Addition Addition
Office of ragent. I a signature 12. Title NAME STREET ADDRESS CITY-ST-ZP TITLE NAME NAME	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE DELETE DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STT 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STT 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STT 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STT 5.4 CIT 5.4 CIT 5.5 STF 5.4 CIT	Agent a Agent	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	HANGES TO OFFICE L. LEAR	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change ☐ Change	FORS IN 12 Dell' Addition Addition Addition
Office of ragent. I a agent. I a agent. I a signature 12. Title name Street adoress city. 51-2P Title street adoress	Signature, typed or printed name of registered agent for the obligation of the college of the co	Land the Exposure (NOTE) D DIRECTORS DELETE DELETE	13. 1.1 TIT 12 NAI 1.3 STT 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STT 2.1 TIT 3.2 NAI 3.3 STT 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STT 5.4 CIT 5.1 TIT 5.2 NAI 5.3 STF 5.4 CIT 6.1 TIT 5.4 NIT 5.5 NAI 5.5 STF 5.4 CIT 6.1 TIT 5.7 NAI 5.8 TIT 5.8 NAI 5.8	AGENT	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	H- HANGES TO OFFIC L. LEAR LASA GROV L. FLS	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change	FORS IN 12 Dell' Addition Addition Addition
Office of regent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE DELETE DELETE	Registered 13. 1.1 TIT 12 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF 5.4 CIT 6.4 TITI 5.2 NAI 5.3 STF 6.4 CIT 6.2 NAI 5.5 TITI 5.5 NAI 5.6 CIT 6.1 TITI 5.7 NAI 5.6 CIT 6.2 NAI 5.7 GC 6.2 NAI 5.	AGENT A AGENT	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	H- HANGES TO OFFIC L. LEAR LASA GROV L. FLS	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change ☐ Change	FORS IN 12 Dell' Addition Addition Addition
Office of ragent. I a gent. I a gent. I a signature 12. Title Name Street adoress City-St-2P Title	Signature, typed or printed name of registered agent for the obligation of the college of the co	D DIRECTORS DELETE DELETE DELETE	Registered 13. 1.1 TIT 12.NAI 1.3 STF 14.CIT 2.1 TIT 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAI 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STF 5.4 CIT 6.1 TIT 5.2 NAI 6.3 STF 6.2 NAI 6	AGENT A AGENT	DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP DORESS	ADDITIONS/CI PRESIDENT SUZANNE 7249 MIM JACKSON U	H- HANGES TO OFFIC L. LEAR LASA GROV L. FLS	3-9 DATE CERS AND	ODIRECT ☐ Change ☐ Change ☐ Change ☐ Change	FORS IN 12 Dell' Addition Addition Addition

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.

CR2E034 (11/98)