## 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

**DOCUMENT #** P98000081224 (

1. Curporation Name

## FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90265 005 \*\*\*150.00

EN	B TRANSPORTS, COF	R.							
j					53903 <b>7</b> - 90 <b>2</b> 65 - 5				
	·			•		] — — -			
Principal Place of Business Mailing Address							2		,
523 T	race Circle  #205	;							
Deerfield Beach, FL 33441						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						09/16/98			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	· - · -	TA	pplied For
21		26				65-0758637		<del></del>	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						E Continue of City Day			Additional
22 27						5. Certifcate of Status Desired	Ц		lequired
City & State City & State						6. Election Campaign Financing	П	\$5.00	May Be
		28	~····			Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	iry		8. This corporation owes the curre	ent year Inta	angible	_
24	25	29	30			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Current	t Registered Agent		al si		10. Name and Address of New R	legistered .	Agent	
	· .		ľ	Nam	ie				
Evilasio F. Brandao				2 Stre	et Addres	ss (P.O. Box Number is Not Accepta	ible)		
	race Circle #205		,						
Deerf	ield Beach, FL 33	1447	8	3					
			8	4 City				85 Zip	Code y. t
<del></del>			<u>.</u> L				<u>FL</u>	1 1	•
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florida Statu of Florida. Such change was	tes, the abo authorized t	ove-name ov the co	ed corpor rooration	ation submits this statement for the 's board of directors. I bereby access	purpose of t the appoir	changing its	s registered egistered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, FI	orida Statut	es.					Shorotor
SIGNATURE		1 Anda9	<del></del>			04/	29/99 DATE	9	
12. ,	Signature, typed or printed name of registered agent		13.	gent signatu	re required w	then reinstating) ADDITIONS/CHANGES TO OFF			3DS IN 12
TITLE	P/T	DELETE DELETE	1.1 TITLE	 :	·	ADDITIONS/CITANGES TO OF	TOERS AN	☐ Change	Addition
NAME	Evilasio F. Brandao			1.2 NAME					
STREET ADDRESS	523 Trace Circle			ET ADDRES					·
CITY-ST-ZIP	Deerfield Beach,		1.4 CITY		~				
TITLE	VP/S	☐ DELETE	2.1 TITLE					Change	Addition
NAME	NederS. Brandao			2.2 NAME					
STREET ADDRESS	523 Trace Circle	<b>#20</b> E		ET ADDRES	25				
CITY-ST-ZIP	Deerfield Beach,		2.4 CITY		~			_	<b></b>
TITLE	Deerlield Beach,	DELETE	3.1 TITLE					☐ Change	☐ Addition
NAME		,	32 NAMI	E				_, ·	
STREET ADDRESS			3.3 STRE	ET ADDRES	is l				
CITY-ST-ZIP			3 4, CITY	-ST-ZIP			<i>(</i>		
TITLE		☐ DELETE	4 1 TITLE					Change	Addition
NAME			4. 2 NAM	E	-				
STREET ADDRESS			4.3 STRE	ET ADDRES	s		•		
CITY-ST-ZIP			4.4 CITY	ST-ZIP					
TITLE		☐ DELETE	51 TITLE					Change	Addition
NAME	la .		5 2 NAME	Ē	-				
STREET ADDRESS			53 STRE	ET ADDRES	ss			_	*
CITY-ST-ZIP			5 4 CITY	- ŞT- ZIP					
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	6.1 TITLE					Change	Addition
NAME			6 2 NAM	E					
STREET ADDRESS			63STRE	ET ADDRES	:s				1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 of on an attachment with an address, with all other like empowered.

04/29/99 (954) 428-2914