PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90096 036 ***150.00

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DOCU	MENT # P98000	08	8538							
	LY TRUCKING, INC.									
A.D. VEL	L) INDOMING, INC.						1	8 300 TERM OF 15 2010 FORE MODEL AGES A 60711 DOLD	u igiga katan dikida	KODA ITA ITA
i j)			
Principal Piac	e of Business	M	alling Address					f sumitalt ifm iding lætif danst dette dens narn	is imimi éméssi messant	INE) IEN TENI
2490 S.W. 32N	O STREET	24	90 S.W. 32ND STREET							
FORT LAUDERS			AT LAUDERDALE FL 33312	!			Į	DO NOT WRITE IN THIS	e SDACE	
							- }	3. Date incorporated or Qualified	SOFACE	
							ļ	10/16/1998		
2. Principal Place of Business 2a. Mailing Address								4. FEI Number	Ap	plied For
21			26					65-0624443 No		
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75	
22		27	ext <u>constant</u> or					3. Conditate of Civilas Desired	Fee Re	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23		28	770	Car	me-			Trust Fund Contribution		o rees
Zip Country			h'			Country		 This corporation owes the current year in Personal Property Tax. 	Yes	□No
24	9. Name and Address of Current	29		<u> </u>	1			10. Name and Address of New Registered		
	5. Applied Bill Products of Guilletin	TOBA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		81	Name				
KELLY, JEREMIAH J IR					82 Street Addres			(P.O. Box Number is Not Acceptable)	·	
2490 S.W. 32ND STREET					82 Street Addres			(F.O. Box Number is Not Acceptable)		
FOR	IT LAUDERDALE FL 33312				83			•. • • •		
					84	City			85 Zip (Code
					1-1	,		_F I	L [_
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 6 Flori	07.1508, Florida Statutes, da. Such change was auth	the a cortzer	ibove d by	s-named the corpo	otation,	tion submits this statement for the purpose of board of directors, I hereby accept the appoint	siyatment as rej siyatment as rej	registered gistered
agent. I a	im familiar with, and accept the obligati	ons of	Section 607.0505, Florida	a Stat	utes.	•				
SIGNATURE	Signature, typed or printed name of registered agent	and title	if applicable. (NOTE: Re	gisterec	1 Agen	d eignature a	required wi	en reinstating) DATE		
12.	DR ESIDENTOFFICERS AND	DIRE	CTORS	13.				ADDITIONS/CHANGES TO OFFICERS A		
TITLE	JEREMIAH JKELLY III DELETE				1.1 TITLE				Change	Addition
NAME:	2490 SW 32 nd 5+.				12 NAME					
STREET ADDRESS					1.3 STREET ADDRESS					
CITY-ST-ZIP					14 CITY-ST-ZIP				☐ Change	[] Addition
TITLE	JEREMIAH KELLY, JR. DOBETE				2.1 TITLE 2.2 NAME				The control of the co	
NAME	QUICE PRESID	un .	·	1		******				
STREET ADDRESS	FT. LAUDER DAL					ADDRESS	l			
CITY-ST-ZIP	TI LHUYERUM	· <u> ,</u>	J DELETE	3.1 TI	MY•5	I-UP	├		Change	Addition
NAME	SENIFER KE	· 64 6	17	3.2 N		<i>'</i>	[_	ا به الحقاق الحقاق التي التي التي التي التي التي التي التي		
STREET ADDRESS	SECRETARY	nd.c	ا در است. المارود و الروانية المارونية و المارونية و المارونية و المارونية و المارونية و المارونية و المارونية			ADDRESS .				
CITY-ST-ZIP	FT. LAUDERDA	LP	FL 33312		πy-s		1			
TITLE	POROTHY KEL	LV	DELETE	4,1 11	_				Change	Addition
NAME	TTOE ACITA HOL	•		4, 2 N	AME					
STREET ADORESS	1 2490 S W 321	rd e	5 + -	4.3 ST	TREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDA	Æ,	FL. 33312	4.4 0	11Y- ST	- ZIP	L			
TILE		-	□ OELETE	5.1 TI			1		Change	Addition
NAME				5.2 N			1			
STREET ADDRESS						ADDRESS	1			
CITY-ST-ZIP					TY-ST	-ZP	├ —		Clean	Addition
TITLE			☐ DELETE	6.1 TI	ILE		ľ		Change	☐ Wordings

14. I hereby carlify 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 path; that I am an officer or director of the corporation or the receiver octustee 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 ACCRESS

RE REQUIRED

04/06/99 954-321-3957 Deptire Phone 8