
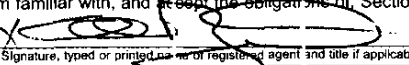


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90201 016 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000099409 1. Corporation Name A PRIVATE TRANSPORTATION CO.			
Principal Place of Business 12433 S.W. 10 TERRACE MIAMI FL 33184		Mailing Address 12433 S.W. 10 TERRACE MIAMI FL 33184	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent DAVID, HERMINIA 12433 S.W. 10 TERRACE MIAMI FL 33184		10. Name and Address of New Registered Agent 81 Name Alfredo A. Basanta 82 Street Address (P.O. Box Number is Not Acceptable) 12433 SW 10 Terrace 83 84 City Miami FL 85 Zip Code 33184	
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  Alfredo A. Basanta President 4/21/99 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS TITLE PSD <input checked="" type="checkbox"/> DELETE NAME DAVIS, HERMINIA STREET ADDRESS 12433 S.W. 10 TERRACE CITY-STATE-ZIP MIAMI FL 33184		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE PSD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME BASANTA, ALFREDO A. 1.3 STREET ADDRESS 12433 SW 10 Terrace 1.4 CITY-STATE-ZIP Miami, FL 33184	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-STATE-ZIP		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-STATE-ZIP		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-STATE-ZIP		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-STATE-ZIP		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-STATE-ZIP		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/30/1998

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 a different like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President **4/21/99**

Date

Daytime Phone #

CR2E034 (11/98)