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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S08483

(7)

AKB TRANSPORT, INC.

Principal Plac	ce of Business	Mailing Address							
16125 POINTY		16125 POINTVIEW RD							
BROOKSVILLE FL 34601			BROOKSVILLE FL 34601-8960						
						3. Date Incorporated or Qualified 01/01/1991		te of Last)9/1996	
2, Principal f	Place of Business	2a. Mailing Address				4. FEI Number	4		Applied For
21		26				59-3041059		ľ	vot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Sta	te	Cily & State				Election Campaign Financing \$5.00 May Be			
23		28	1			Trust Fund Contribution			d to Fees
	Country	Zip	Cour	itry		8. This corporation has liability for in	ntangible	tax under	s. 199.032,
24	[25]	29	30			Florida Statutes 10. Name and Address of New Reg	Yes [
	9. Name and Address of Currer	it ueðistelen viðelit		81	Name	10, Marite and Address of New Neg	lierolen i	Agent	
	umgartner, allen W. 125 pointview RD			_1					
	125 POINTVIEW NO 10 FT DADE AVE			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
	OOKSVILLE FL 34601		ŀ	83	+		 .		
				84	City			85 Zij	o Code
				_	-		FL		<u></u>
office or agent. In	righte provisions or sections 607,050 registered agent, or both, in the State an familiar with and accept the oblig	of Florida Such change was ations of Section 607.0505, Fl	authorized orida Statu	l by Ites	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	t the app	ointment a	is registered is registered
SIGNATURE	Signature, typed or pented name of registered ag-	ent and title d applicable (NO)	E: Registered	Ager	nt signature regul	lred when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TiTLF	DP	DELETE	TE 1.1 TITL		T			☐ Change	
NAME	BAUMGARTNER, ALLEN W.		1.2 NA	ME					
SIMEEL ADDRESS	7380 FT DADE AVE		1.3 \$TF	REET	ADDRESS				
CITY-ST-ZIP	BROOKSVILLE FL		1.4 CIT	Y - \$1	T- ZIP				
T:TLE	DVS	☐ DELETE	21 TIT	LE				☐ Change	Addition
MAME	BAUMGARTNER, KAY A.		2.2 NA	ME					
STREET ADDRESS	7380 FT DADE AVE		2.3 519	REET	ADDRESS	•			
CITY - ST - 7F	BROOKSVILLE FL			IY-S	ST-ZIP				·
TITLE	DALLIA CARRENTE MANA	DELETE	3.1 TIT	LE				Change	Addition
NAME	BAUMGARTNER, KAY A.		3.2 NA	ME					
STREET AJURESS	7380 FT DADE AVE				ADDRESS				
CITY - \$1 - 715	BROOKSVILLE FL	T DELETE	3 4. CI		IT-ZIP			Chan	# #####
HILE		L] DELETE	1 4.1 THT					Change	Addition
NAME.			4 2 NA						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIF		DELETE	4.4 CH 5.1 TIY		I-ZIP		<u> </u>	Change	Addition
HAME		£3 britin	5.1 III 5.2 NA					- Onange	, La Rudillon
					ADDRESS				
STREET ADDRESS									
THILE		DELETE	5.4 CIT 6.1 TIT		1-Z)P			Change	Additio
NAME		בן סנונית	6.2 NA						Las registo
1					ADDRESS				
STREET ADDRESS	!		03311	ICC f	UNDUE 29				

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE: Kay Q. Baumgartner 4-197 352-799

64 CITY-ST-ZIP

14. If do 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. If 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