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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S21740

(3)

TRANSPORTATION AGENCY SERVICES CORP.

| | | | | | | { | | | | | |
|---|---|--|-------------|--------------|--------------|----------------------------------|--|------------------|--------------------------|---------------|--|
| Principal Place of Business Mailing Addre | | | | | | | | | | | |
| 4218 SW 9TH ST. Miami Fl 33134 | | 4218 SW 9TH ST. Miami Fl 33134-2622 | | | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualified 12/31/1990 | | ate of Last R 25/1996 | leport | |
| 2. Principal Pt | lace of Business | 28. Mailing Address 26 | | | | 65-0262227 Not App | | | pplied For | | |
| 21 | | | | | | | | | ot Applicable | | |
| Suite, Apt | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | Additional equired | | |
| City & State | (t) | City & State | | | | 6. Election Campaign Financing | | | | | |
| 23 | | 28 | | | | 1 | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution | | | | |
| Zip | Country | Zip | Cou | ntry | | | 8. This corporation has liability for | intangible | tax under s | . 199.032, | |
| 24 | 25 | | 30 | | <u> </u> | | 7 12 10 0 0 10 14 10 0 | | No. | | |
| | g. Name and Address of Curre | nt Registered Agent | | 81 | Name | 1 | 0. Name and Address of New Re | gistered | Agent | | |
| | NZALEZ, MERCEDES B SW 9TH ST. | | ļ | | | | ······································ | | | | |
| | MI FL 33134 | | | 82 | Street A | Address | (P.O. Box Number is Not Acceptal | ole) | | | |
| WWW | MI I E 00 104 | | | 83 | | | | | | | |
| | | | | 84 | City | | WELL-BOTTOM CO. C. | | 85 Zip | Code | |
| | | | | * | City | | | FL | . 63 Zip | Code | |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered agent, or both, in the State | 02 and 607.1508, Florida Statute | es, the at | oove | -named | corpora | tion submits this statement for the part of directors. I hereby acce | ourpose o | f changing if | ts registered | |
| agent. I a | ni familiar with, and accept the oblic | jations of, Section 607.0505, Flo | rida Stat | utes | | | b board of amounts, finding, about | P. 1. 10 upp | | | |
| SIGNATURE | | | | | | | | D. *F | | | |
| 12. | Styrature Type dior printed name of registered ag | ient and tille if applicable (NOTE ND DIRECTORS | flegislared | Ager | it signature | required w | then reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND | DIRECTOR | RS IN 12 | |
| TITLE | PO | DELETE | 1.1][| TLE | | | ABBITTONS/OTTAINALD TO OTTA | 32/10/4/11 | Change | Addition | |
| NAME | GONZALEZ, MERCEDES | | 1.2 N/ | ME | 1 | | | | | | |
| STREET ADORESS | 4218 SW 9TH ST. | | 1.3 \$1 | REET | ADDRESS | | | | | | |
| CITY-ST ZIP | MIAMI FL | | 1.4 CI | TY-\$1 | - 210 | | | | | | |
| TITLE | SD | ☐ DELETE | 2.1 TI | TLE | | | | | Change | ☐ Addition | |
| NAME | GONZALEZ, CHARLES A. | | 2.2 NA | ME | | | | | | | |
| STREET ADDRESS | 4218 SW 9TH ST. | | | | ADDRESS | | | | | | |
| C(1Y - S1 - ZIP | MIAMI FL TD | DELETE | 2.4 C | | T-ZIP | | | | Change | Addition | |
| JIILE : | GONZALEZ, JOHN A. | C) pittit | 3.1 II | | | | | | CT CHANGE | Addition | |
| NAME STREET ADDRESS | 4218 SW 9TH ST. | | | | address | | | | | | |
| CITY-ST-ZIP | MIAMI FL | | 3.4. C | | | | | | | | |
| THE | A | DELETE | 4.1 (1 | | | | ************************************** | | Change | Addition | |
| NAME | | | 4. 2 N | AME | | | | | | | |
| STREET ADDRESS | | | 4.3 ST | REET | address | | | | | | |
| Offy St-ZiP | | | 4.4 01 | | - ZIP | | | | 176 | 7 A 2.00 | |
| TIFLE | | ☐ DELETE | 51T) | | | | | | L] Change | Addition | |
| NAME | | | 52 N | | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | |
| CITY - ST - 70° TITLE | | DELETE | 5 4 CI | TLF | 1 - ZIP | | | ····· | Change | Addition | |
| NAME | | <u></u> | 62 N | | | | | | | | |
| STREET ADDRESS | | | 1 | | ADDRESS | | | | | | |
| CITY - ST - ZIF | | | | ITY-S | | | | | | | |
| 14 I do berel | by certify that the information supplie | ed with this filing does not quali | fy for the | exe | motion s | tated in | Section 119.07(3)(i), Florida Statute | s. I furthe | or certify that | t the | |
| l lamano | on indicated on this annual report or ifficer or director of the corporation of in Block 12 of Block 13 if changed, i | or the receiver or trustee empow | vered to a | accu exec | ute this r | eport as | s required by Chapter 607, Florida | Statutes; a | and that my マラスス: | name | |
| | | | | | | | 1 (30.3 | | - 137 | 12 | |