SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **E**IVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

HIS AND HER TRUCKING, INC.

Principal Place of Business	Mailing Address
3012 45 ST E	3012 45 ST E

FILED Aug 26, 1999 8:00 am Secretary of State

08-26-1999 90002 045 ***550.00



BRADENTON				3012 45 51 E BRADENTON FL 34208										
DIADERTOR TE SAZO									DO NOT WRITE IN THIS SPACE					
									3. Date Incorporated or	Qualified				
	س.								04/11/1991				-	
2. Principal F	lace of Busin	ness	2a	, Mailing A	ddress				4. FEI Number			<u> </u>	Applie	
21			26						65-02675 <u>95</u>					pplicable
Suite, Apt.	#, etc.		27	Suite, Ap	it. #, etc.				5. Certificate of Status D	esired			75 Add e Requi	
City & Star	te			City & St	tate				6. Election Campaign Fi	nancing		\$5	.00 Ma	y Be
23			28						Trust Fund Contribution	on		Ad	ded to F	ees
Zip		Country	L	Zip		Cou	ntry		8. This corporation owes		nt year	١	₩	
24		25	29			30			Intangible Personal P			Yes	ΣN	<u> </u>
	9. Name	and Address of Curre	nt Regis	stered Age	ent				10. Name and Address	of New R	egistered A	gent		
C L	ANEV DOL	INA C					81	Name						
	ANEY, DOI	nna C. Reet, East					82	Street Add	iress (P.O. Box Number is No	t Acceptal	ole)			
	ADENTON	•				ļ	83							
Dit							03							
						ļ	84	City			FL	85	Zip Cod	ie
11. Pursuan	t to the provi	sions of sections 607.050		07.1508. F	lorida Statı	utes, the ab	ove-	named corpo	oration submits this statement	for the pu	rnose of ch	anging	its regist	tered
office or	registered a	gent, or both, in the State with, and accept the oblig	e of Flor	rida Such r	change was	s authorized	1 hv	the corporal	tion's board of directors. I here	by accep	the appoin	tment	as regist	ered
		mana accept the cong	000	an socion	211	Dana	.0	C ChA	nev		8-20	-99		
SIGNATURE	Signature, typed	or printed name of registered age	ant and title						quired when reinstating)		DATE			
12.	• • • • • • • • • • • • • • • • • • • •	OFFICERS AT	ND DIRE	ECTORS		13.			ADDITIONS/CHANGE	S TO OFF	ICERS AN	D DIRE	CTORS	IN 12
TITLE	DVP				DELETE	1.1 7)7	LE				ì	Cha	nge	Addition
NAME	MAGGA	rd, jerome d.				1.2 NA	ME							
STREET ADDRESS	4315 26	TH AVE E.				1,3 ST	REET	ADDRESS						
CITY-ST-ZIP	BRADEN	VTON FL 34208				1.4 CI	TY-\$1	-ZIP				_		
TITLE	DP				DELETE	2.1 TIT	LE		**			Cha	nge 🗔	Addition
NAME	CHANE	Y, DONNA C.		.	-	2.2 NA	ME							
STREET ADDRESS	3012 45	TH ST E		•		2.3 ST	REET	ADDRESS						
CITY-ST-ZIP		NTON FL				2.4 CI	ry-\$1	-ZiP						
TITLE	ST				DELETE	3.1 TIT						Cha	nge	Addition
NAME	1 -	Y, DONNA C.		L.		3.2 NA	MΕ	ļ						
STREET ADDRESS	004046					3.3 ST	REET	ADDRESS						
CITY-ST-ZIP		NTON FL				3.4 CI		[
TITLE					DELETE	4.1 TIT	_					Cha	inge	Addition
NAME				_		4.2 NA	ME				•		. _	
STREET ADDRESS						•		ADDRESS						
CITY-ST-ZIP						4.4 CI								
TITLE			*		DELETE	5.1 TI					1	Cha	inge	Addition
NAME	1				0	5.2 NA							J	
STREET ADDRESS						5.3 ST	REET	ADDRESS						
CITY-ST-ZIP	ones 1014	11.				5.4 CI						•		
TITLE 4 5					DELETE	6 1 TI					Ī	Cha	inge [Addition
NAME		and the second s		_	_ +	6.2 NA	ME				•		. –	
STREET ADDRESS	A. 50	Park 3 4						ADDRESS						
CITY-ST-ZIP						6.4 CI								
	1	information supplied wit				₩ U.7 UI								

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.

SIGNATURE: Down & C. Chaney 8-20-95 (941) 748-2118

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date