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Secretary of State

04-20-1999 90079 007 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S63858

1. Corporation Name

JOSEPH TRANSPORTATION, INC.

Principal Place of Business

 10717 RT 92E
 TAMPA FL 33610
 US

Mailing Address

 P. O. BOX 2408
 BRANDON FL 33509
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1991

4. FEI Number

59-2822653

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

FRECKER, WILLIAM H.
512 EAST KENNEDY BLVD.
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Palm Harbor
FL
34685

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

George L. Joseph
 Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

 TITLE **SD**
 NAME **JOSEPH, GEORGE L.**
 STREET ADDRESS **P O BOX 2408 N/A**
 CITY-ST-ZIP **BRANDON FL**
☐ DELETE

 TITLE **PD**
 NAME **JOSEPH, PATRICIA G.**
 STREET ADDRESS **P. O. BOX 2408 N/A**
 CITY-ST-ZIP **BRANDON FL**
☐ DELETE

 TITLE **TD**
 NAME **JOSEPH, GEORGE D.**
 STREET ADDRESS **703 BOWSPRIT PLACE**
 CITY-ST-ZIP **PALM HARBOR FL**
☐ DELETE

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ DELETE

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ DELETE

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ DELETE

14. I 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; 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 all other like empowered.

SIGNATURE:

George L. Joseph
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-9

786-4833

CR2E034 (11/98)