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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S65815

(0)

THE NEFF'S TRUCKING, INC.

Suite Apt #, etc 2522 SW 27TH AVE. Country Zip Zip Country Zip Country Zip Country Zip Country Zip	St. 75 Additional Fee Required \$5.00 May Be Added to Fees or intangible tax under s. 199.032, Added to Fees To intangible tax under s. 199.032, Added to Fees
3. Date Incorporated or Qualifie 07/08/1991 2. Principal Place of Business 28. Mailing Address 26. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 28. Suite, Apt. #, etc. 29. City & State 29. City & State 29. Country 20. Zip 21. Country 21. Country 22. Country 23. Country 24. Election Campaign Financing 25. Trust Fund Contribution 26. Election Campaign Financing 27. Trust Fund Contribution 28. This corporation has liability to 29. Name and Address of Current Registered Agent 30. Name and Address of New 31. Name 32. Street Address (P.O. Box Number is Not Acceptors) 33. Date Incorporated or Qualifies 34. FEI Number 359-3072847 55. Certificate of Status Desired 46. Election Campaign Financing 77. Trust Fund Contribution 87. This corporation has liability to 88. This corporation has liability to 89. Name and Address of Current Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptors)	St. 75 Additional Fee Required \$5.00 May Be Added to Fees or intangible tax under s. 199.032, Added to Fees To intangible tax under s. 199.032, Added to Fees
2. Principal Place of Business 2a. Mailing Address 25. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 27. City & State City & State City & State 28. Country Zip Country Zip Country Zip Country 29. Suite, Apt. #, etc. 29. Country Zip Country Zip Country Sign Country Election Campaign Financing Trust Fund Contribution 8. This corporation has liability to Florida Statutes 9. Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. OCALA FL 34474	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees or intangible tax under s. 199.032, Yes No Registered Agent table) 85 Zip Code e purpose of changing its registered
Suite, Apt. #, etc. 22 City & State City & State Country Zip Country Zip Country Zip Country Zip Suite, Apt. #, etc. 28 City & State City & State Country Zip Country Zip Suite, Apt. #, etc. City & State City & State Country Zip Country Suite, Apt. #, etc. City & State Country Trust Fund Contribution 8. This corporation has liability to Florida Statutes 9, Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. OCALA FL 34474	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees or intangible tax under s. 199.032, Ves No Registered Agent Agency State No Registered No R
22 City & State 28 Country Zip Country 29 Country 30 Florida Statutes 9, Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. OCALA FL 34474 5, Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability to Florida Statutes 10, Name and Address of New 81 Name 82 Street Address (P.O. Box Number is Not Acception of Acception 19, Name and Address of New Name and Address of Name and Nam	Fee Required \$5.00 May Be Added to Fees or intangible tax under s. 199.032, Yes No Registered Agent table) FL 85 Zip Code Durpose of changing its registered
23 Zip Country Zip Country 3 B. This corporation has liability to Florida Statutes 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. 0CALA FL 34474 28 Trust Fund Contribution 80 Trust Fund Contribution Report New 10. Name and Address of New 10. Name and Address of New 10. Name and Address of New 10. Name 10	Added to Fees or intangible tax under s. 199.032, Ves No Registered Agent table) Plant State S
Zip Country Zip Country B. This corporation has liability to Florida Statutes 9. Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. OCALA FL 34474 Country Zip Country B. This corporation has liability to Florida Statutes 10. Name and Address of New B1 Name 82 Street Address (P.O. Box Number is Not Accept	Registered Agent table) Solution Page
9. Name and Address of Current Registered Agent NEFF, HELEN L. 2522 SW 27TH AVE. OCALA FL 34474 10. Name and Address of New Name Street Address (P.O. Box Number is Not Accept	Registered Agent table) 85 Zip Code e purpose of changing its registered
NEFF, HELEN L. 2522 SW 27TH AVE. 0CALA FL 34474 81 Name 82 Street Address (P.O. Box Number is Not Accept	FL 85 Zip Code e purpose of changing its registered
2522 SW 27TH AVE. OCALA FL 34474 82 Street Address (P.O. Box Number is Not Accept	FL 85 Zip Code e purpose of changing its registered
	e purpose of changing its registered
	e purpose of changing its registered
84 City	e purpose of changing its registered
	e purpose of changing its registered cept the appointment as registered
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the 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 it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE Suprature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE PD DELETE 1.1 TITLE	Change Addition
NAME NEFF, HELEN L. 1.2 NAME	
STREET ADDRESS 6325-S MAGNOLIA AVE. 1.3 STREET ADDRESS	
CITY-ST-7IP OCALA FL 1.4 CITY-ST-ZIP	
TITLE D CELETE 2.1 TITLE	Change Addition
NAME NEFF, WARD 2.2 NAME	
STREET ADDRESS 6325 S. MAGNOLIA AVE. 23 STREET ADDRESS	
CITY-ST-ZIP OCALA FL 2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	Change Addition
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
C11Y-S1-ZIP 3.4. C11Y-S1-ZIP	0
TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE	Change Addition
	Em cuando El vocilion
NAME 52 NAME	
STREET ADDRESS 53 STREET ADDRESS	
CTY-ST-ZIP	Change Addition
	Supplied First Supplied
STREET ADDRESS 63 STREET ADDRESS 64 STREET ADDRESS	
CITY-S1-ZIP 64 CITY-S1-ZIP 64 CITY-S1-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida States	utes. I further certify that the
information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Floric appears in Block 12 or Block 13 if changed, or on an attachment with an address.	egal effect as if made under oath; that