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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

AAAA TRANSPORTATION SERVICES, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					•	I JEBIEBIB III IBIII IBIBIB ABIII IBUDI HIBI BIBIF DI	811 \$1911 B1\$11 B183	1 81211 1861
-1010 8W 10 AVE 660 N.W 38TH AVE. SUITE 2 DEERFIELD BEACH FL 33442				DO NOT WRITE IN THIS SPACE		IS SPACE		
PONPANO BEACH FL 22068 US						3. Date Incorporated or Qualified	0 011102	
00						12/02/1991		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	- Ar	oplied For
21 /700	E COMPRECIALBH	/D26				65-0298344	No	ot Applicable
Suite, Apt.		Suite, Apt. #, etc. 27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State						6. Election Campaign Financing	\$5.00 May Be	
	KAUDEROBJE, PH	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip Country				8. This corporation owes or has paid the current year Intangible		
24 <i>333</i> 2		29 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Current			81	Name	10. Name and Address of New Registers	d Agent	
	VINO, MICHAEL, 🍇 🤼 😘	•			1101110			
660 N.W. 38TH AVE.				82	Street Ad	Address (P.O. Box Number is Not Acceptable)		
DEERFIELD BEACH FL 33442				83				
				84	City		85 Zip	Code
				<u>L</u>		F		/
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, Forida Statutes.								
SIGNATURE MICHARL Soviato Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND	DIRECTORS	13.	\angle		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	Property of	☐ DELETE	☐ DELETE 1,3/fi				Change	Addition
NAME	SAVINO, MICHAEL 🖛	O, MICHAEL # 1.2		AME		•		
STREET ADDRESS	660 N.W. 38TH AVE		1.3 S	1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 Ci	TY-ST	- ZIP			
TITLE	DELETE		2.1 11	2.1 TITLE			Change	Addition
MAME				2.2 NAME				
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 01		1-ZIP			
TITLE		☐ DELETE					Change	☐ Addition
HAME			3.2 N					1
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	DELETE			3.4. CITY - ST - ZIP			Change	☐ Addition
TITLE				4.1 TITLE 4. 2 NAME			C CHAIRE	
NAME								
STREET ADDRESS					ADDRESS			
CFTY-ST-Z#P TITLE	· · · · · · · · · · · · · · · · · · ·			TY-ST	- ZIP		Change	Addition
NAME	יין מנרגוג			5.1 TITLE 5.2 NAME				
					ADORESS			
STREET ADDRESS				INEET A				
CITY-ST-ZIP TITLE		DELETE	DELETE 6.11		- LIF		Change	Addition
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
·					1			
CITY-ST-ZIP	partify that the information complied wi	ith this filing doos not qualify		ITY-ST		Lin Section 110 (17/3)/i) Florida Statutes further	certify that the	information

I nereby certify that the information supplied with this filling 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.