

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V18045 (7)
1. Corporation Name
TYMES TWO TRANSPORT, INC.

Principal Place of Business 161 SANDPINE CT ST. CLOUD FL 34771 US	Mailing Address 161 SANDPINE CT ST. CLOUD FL 34771 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3200 OLD WINTER GARDEN RD. Suite, Apt. #, etc. 22 2114 City & State 23 OCOEE, FL. Zip 24 34761 Country 25 ORANGE	2a. Mailing Address 26 P.O. BOX 759 Suite, Apt. #, etc. 27 City & State 28 OCOEE, FL. Zip 29 34761 Country 30 ORANGE
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3. Date Incorporated or Qualified 02/24/1992	4. FEI Number 59-3112483	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

MOSELEY, FREDERICK R., IV
171 SANDPINE COURT
ST. CLOUD FL 34771

10. Name and Address of New Registered Agent

81 Name FREDERICK R. MOSELEY IV	82 Street Address (P.O. Box Number is Not Acceptable) 3200 OLD WINTER GARDEN RD.	83 APT. 2114	84 City OCOEE	85 Zip Code FL 34761
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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 Fred Moseley FRED MOSELEY
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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOSELEY, FREDERICK R., IV 171 SANDPINE COURT ST. CLOUD FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD MOSELEY, FREDERICK R., IV 3200 OLD WINTER GARDEN RD. APT. 2114 OCOEE, FL. 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MOSELEY, BETSY D. 171 SANDPINE COURT ST. CLOUD FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	STD MOSELEY, BETSY D. 3200 OLD WINTER GARDEN RD. APT. 2114 OCOEE, FL. 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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.

SIGNATURE: Fred Moseley FRED MOSELEY

CR2E034 (10/97)