FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

V25585 **DOCUMENT #** 1. Corporation Name

(3)

PAUL TRANSPORTATION CO.

PAUL TF	RANSPORTATION CO.						
Principal Place of Business 270 SOUTHWEST 34TH STREET FORT LAUDERDALE FL		Mailing Address 7647 CINEBAR DRIVE BOCA RATON FL 33433 US					
				3. Date incorporated or Qualified			
2. Principal Plac	re of Business	2a. Mailing Address			4. FEI Number		Applied For
21 7647 (INEDAR DINE 26)					65-0323953		Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc					5. Certificate of Status Desired		Additional Required
27					6. Election Campaign Financing	\$5.0	May Be
City & State	ROTON, FL	City & State			Trust Fund Contribution	Ll Adde	ed to Fees
23 BUM	Country	Zip	Countr	у	8. This corporation has liability for i	ntangible tax under s	199.032,
241 13 3 4	33 25 USA	29	30			□ No	
	9. Name and Address of Currer	nt Registered Agent		T	10. Name and Address of New R	egistereo Ageni	
			8	1			
PALMER, ROBERT M ESQ			8:	82 Street Address (P.O. Box Number is Not Acceptable)			
	UTH BAYSHORE DRIVE		8:	3			
SUITE 90							'ıp Code
MIAMI FL			8	1 '	ration submits this statement for the purify of directors. I hereby accept the app	FL!	·
SIGNATURE	and accept the obligations of, Sec			gerst e girigt pro neo part	Owner 64 7 mag. ADDITIONS/CHANGES TO OFF		
12.	SD	DEVETE		F		Change	Addit.on
NAME	VOGEL, PAUL		1.2 NAM	£			
STREET ADDRESS	7647 CINEBAR DRIVE		1.3 STR	ET ADDRESS			
City-SI-ZiF	BOCA RATON FL 33433		14 C-1Y	-ST 7/P		Change	e Addition
TUTLE	PO	☐ DELETE					
NAME	VOGEL, MARSHA		2.2 NAM	EET ADDRESS			
STREET ADDRESS	7647 CINEBAR DRIVE			-ST-ZP			
CITY - ST - ZIP	BOCA RATON FL 33433	DELETE		.f	Change Addition		e Addition
NAME			3 2 NAM	At-			
STREET ADDRESS			33 53	GET ADDRESS			
City-ST-ZiP				r - \$1 - Z\P		☐ Chang	e 🔲 Addition
THTLE		☐ DELETE	4 1 111			Chang	
NAME			4.2 NAN	1			
STREET ADDRESS				r F CADDRESS Y - ST - Z-P			
CITY - ST - ZIP		DELETE	5 1 H	-		Chang	e 🔲 Addition
TITLE			5 2 NA				
NAME STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP			54Cil	Y - ST - 7:F			Addition
TITLE		☐ DELETE	6 1 U	I		☐ Chang	ge
NAME			6.2 NA	ME			

€ 3 STREET ADDRESS

6.4 CHY - S* - 7.P

SIGNATURE:

STREE! ADDRESS

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental arrusal report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13/II changed or on an attaching not with an address.

CR2E034 (12/95)