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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **V38321**

(8)

1. Corporation IBC TRA	NSPORTATION CORPORA	` '					
Principal Place of Business Mailing Address  730 W MCNAB RD FT LAUDERDALE FL 33309  FT LAUDERDALE FL 33309-21					f 1881) S1880 Juge soshi tibik sida 11181 dibu anati arkti anati anati		
					3. Date Incorporated or Qualified 05/21/1992	3a. Date of Last 03/06/1996	
2. Principal FI	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0335985	<u> </u>	Applied For Not Applicable
Suite Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
Zip Country		28 7in	Zip Country		Trust Fund Contribution Added to Fees  8. This corporation has liability for Mangible tax under s. 199.032,		
24	25	29	30	<u></u>	Fiorida Statutes	Yes No	8. 199.032,
REA	9. Name and Address of Curr K, ARTHUR J.	ent Hegistered Agent		11 Name	10. Name and Address of New Re	gistered Agent	
848	BRICKELL AVENUE			2 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)	<del></del>
SUITE 200				13			
MIA	MI FL 33131						
				City	·	FL	p Code
11. Pursuant to	to the provisions of Sections 607.05 egistered agent, or both, in the Sta	002 and 607,1508, Florida Statu te of Florida, Such change was	ites, the abo authorized	ove-named co by the corpor	orporation submits this statement for the pration's board of directors. I hereby accept	ourpose of changing of the appointment is	its registered as registered
SIGNATURE	п (апплат with, али ассерт те орг	gallons di, Section 607.0505, P	iorioa statu	168			
	Signature, typed or pricted carrie of registered a	gent and title if applicable. (NO ND DIRECTORS	TE: Registered /	Agent signature rec	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	NDC IN 12
12, TITLE	PD OFFICERS A	DELETE	1.1 TITL	E	ADDITIONS/CHANGES TO OFFIC	☐ Change	
NAME	ELLMAN, J. LEON	<del></del>	1.2 NAM	1		- •	_
STREET ADDRESS	730 W MCNAB RD		1.3 STAL	EET ADDRESS			
CITY-S1-ZIP	FT LAUDERDALE FL		1.4 CITY	r-ST-ZIP			
TITLE	VPS DELETE		: 2.1 TITL	E		Change	e Addition
NAME	BERK, ARTHUR J		2.2 NAM	1			
STREET ADDRESS	730 MCNAB ROAD FT. LAUDERDALE FL			EET ADDRESS			
CITY+ST-ZIP TITLE	VPT	DELETE	2. 4 CIT	Y-ST-ZIP		Change	e Addition
NAME	animi appara i		3.1 HA	\ \		E. 0.400	- <u> </u>
STREET ADDRESS	MAA ME MANUAR ROAD			EET ADDRESS			
CITY - S1 - ZIP	FT. LAUDERDALE FL			Y-ST-ZIP			
TITLE	٧	☐ DELETE	4.1 TITL			☐ Chang-	e Addition
NAME	DUANY, ANTHONY A		4. 2 NAI	ME			
STREET ADDRESS	730 W. MCNAB RD.		4.3 STR	EET ADORESS			
CITY-ST-7IP	FT. LAUDERDALE FL 33309	- I actor		Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL	1		Chang	e 🔲 Addition
NAME ONDERT INDUSED			5.2 NAN	į.			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 DITY 6.1 TITL	r-st-zip F		☐ Chang	e Addition
NAME		least south	6.2 NAA	Į.		U	hanf Flagging
STREET ADORESS				EET ADORESS			
CITY-\$1-ZIP				r-ST-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 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 chapter 607 an an attachment with an address.

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-24-97

(954) 977-3094 Dayline Phone

**FILED** 

Jan 31 1997 8:00am

Secretary of State

e Priorie #

034 (9/96)