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 # V58378

(3)

AMERICAN TRUCKING REPORTS, INC.

()

FILED Apr 30 1998 8:00am Secretary of State



| Principal Place | e of Business | Mailing Address | | | | ***** | ************ | |
|---|---|--|--------------------------|--------------|---|----------------------------|------------------------------|--|
| 6481 RAMBLE | | 6481 RAMBLER DR | | | | | | |
| PENSACOLA I | FL 3250 5 | PENSACOLA FL 32505 | | | DO NOT WRITE IN TURE | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualified | SPACE | | |
| | | | | | 08/14/1992 | | | |
| 9 Principal Pi | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | Annilod For | |
| 21 | lace of Business | — <u> </u> | | | 59-3195943 | | Applied For | |
| Suite, Apt. | # MC | Suite, Apt. #, etc. | | | 08-0 180840 | \$0.7 | Not Applicable | |
| 22 | #, \$1 0. | <u> </u> | | | 5. Certificate of Status Desired | | 5 Additional Regulred | |
| City & State | 9 | City & State | | | C Floation Comparing Figure 19 | | <u> </u> | |
| 23 | • | 28 | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip [| Country | | 8. This corporation owes or has paid the current year Intangible | | | |
| 24 | 25 | | 30 | • | Personal Property Tax due June 30. Yes No | | | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | |
| FRY, MICHAEL B1 | | | | | Name | | | |
| | 1 RAMBLER DR | | 00 0 | | | | | |
| | NSACOLA FL 32505 | | 82 Street Ad | | dress (P.O. Box Number is Not Acceptable) | | | |
| 7 441 | INTART I F AFANA | | 83 | | | | | |
| | | | | | | | | |
| | | | 84 | City | FL | 85 Z | Zip Code | |
| 44 Dureuppi i | to the provinces of Sections 607.0 | 0.03 and 607 1509 Florida Statutor | r the about | o pamod | | | a ita ragistarad | |
| 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. | | | | | | | | |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE Muchael J Fray Michael L. Fray Signature, typed of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE ODTE | | | | | | | | |
| 12. | | AND DIRECTORS | 13. | ен ыдпаюте | ADDITIONS/CHANGES TO OFFICERS AND | DIRECT | ORS IN 12 | |
| TITLE | P | DELETE | 1.1 TITLE | | TABLITORIO ATTACA TO CITTOLINO ATTA | Chang | | |
| NAME | FRY, MICHAEL L | | 1.2 NAME | | | | | |
| STREET ADDRESS | 6481 RAMBLER DRIVE | | | FADDRESS | | | | |
| | PENSACOLA FL 32505 | | | | | | | |
| CITY-ST-ZIP TITLE | | | 1.4 CITY-1 2.1 TITLE | 51 - ZIP | | Chang | ge Addition | |
| NAME | NOWELL, JANIE | | 2.2 NAME | | | | go (| |
| STREET ADDRESS | 6481 RAMBLER DRIVE | | | LADDRECC | | | | |
| | PENSACOLA FL 32505 | | 2.3 STREET | | · | | | |
| CITY+ST-ZIP TITLE | 12.00.000 | DELETE | 2. 4 CITY - 3.1 TITLE | 51-ZIP | | Chang | ge Addition | |
| · · | | <u> </u> | 3.2 NAME | | | C Chang | go | |
| NAME OTREET APPROVES | | | | | | | İ | |
| STREET ADDRESS | | | 3.3 STREET | | | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 3.4. CITY- 4.1 TITLE | SI-ZIP | | Chang | ge Addition | |
| 1 | | beech | | 1 | | Cridit | & □ Vacition | |
| NAME ATREET ABORES | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | Посте | 4.4 CITY - 5 | ST-ZIP | | Chee | no Addition | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | L Chang | ge 🔲 Addition | |
| NAME | | | 5.2 NAME | 1 | | | | |
| STREET ADDRESS | | | 5.3 STREET | - 1 | | | | |
| CITY+ST-ZIP | | Dr. Fee | 5.4 CITY-5 | ST-ZIP | <u> </u> | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | L Chang | ge 🔲 Addition | |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CITY-5 | | | | | |
| 14. I hereby o | ertity that the information supplied on this annual report or supplement | t with this filing does not qualify for intal annual report is true and accou | the exemp | otion state | ed in Section 119.07(3)(i), Florida Statutes. I further or nature shall have the same legal effect as if made ur | artify that | the information that I am an | |
| 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 argatlachment with an address. | | | | | | | | |
| Block 12 (| | | | | , , | | ! | |
| | #X | 1711 10 1 | /:/ . | C . | 1.1-4/20 0 | (C) 11 | 10 1111 | |