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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 14, 1999 8:00 am **Secretary of State**

03-14-1999 90008 005 ***150.00

DOCLIMENT

1. Corporation Name ANNETTE'S TRANSPORT INC.									
Principal Pt	lace of Business	Mailing Address						11411 61611 8	1611 6161) 188
6525 LA JOLLA ST ORLANDO FL 32818 6525 LA JOLLA ST ORLANDO FL 32818						DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualifed 08/24/1992 			
2. Principa	I Place of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				59-3160816			t Applicable
Suite, A	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required			
	City & State City & State					Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip	Country 25	Zip	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No			
124)	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New R	legistered Age	nt	
Harper - MGADAMS, ANNETTE				81	Name				. .
6525 LA JOLLA ST				82	Street Ad	dress (P.O. Box Number is Not Accepta	ible)		
ORLANDO FL 32818				83				- , 	
				84	City		FL	Zip C	
l office o	ant to the provisions of Sections 607.0 or registered agent, or both, in the Sta I am familiar with, and accept the ob	ate of Florida. Such change	was author	rizeo by	ine corpora	rporation submits this statement for the ation's board of directors. I hereby accep	purpose of cha t the appointme	nging its ent as req	registered gistered
SIGNATUR	RE		WOTE D			diameter and a salaratetra and	DATE		
40	Signature, typed or printed name of registered	agent and title if applicable. AND DIRECTORS		13.	t signature requ	uired when reinstating) ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
12.	PD	DELE		1.1 TITLE		ADDITIONS/OTIANSES TO OF		Change	Addition
TITLE PD □ □ BELETE ■ 1.				THE STATE OF					

D DIRECTORS IN 12 Change HARPER, ANNETTE .2 NAME NAME 6525 LA JOLLA ST 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE TRAVIS HARPER 2.2 NAME NAME 6525 LA JOLLA ST 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 61 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)