2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

CITY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered.

Mar 09, 2004 8:00 am Secretary of State **DOCUMENT # 158943** 1. Entity Name 03-09-2004 90059 018 ***150.00 SOUTHERN TRUCK EQUIPMENT SERVICE INC. Principal Place of Business Mailing Address 1314 W. CHURCH ST 1314 W CHURCH ST ORLANDO FL 32805 1314 W. CHURCH ST ORLANDO FL 32805 2. Principal Place of Business 3. Mailing Address SAME 1314 WEST CHURCH ST Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-0600648 ORLANDO, FLORIDA Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name -SAPP, JERALD C-----Street Address (P.O. Box Number is Not Acceptable) 1314 WEST CHURCH STREET ORLANDO FL 32805 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DP ☐ Delete TITLE Change ☐ Addition TITLE NAME SAPP, JERALD C NAME 103 WAX MYRTLE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-289 LONGWOOD, FL 00000 ☐ Change Delete TITLE ☐ Addition TITLE SAPP, MAUREEN A NAME STREET ADDRESS 3103 KELLY PARK RD STREET ADDRESS APOPKA, FL 00000 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE SAPP, RODNEY D NAME NAME STREET, ADDRESS STREET ADDRESS 1314 WEST-CHURCH ST-CITY-ST-ZIP CITY-ST-7IP ORLANDO, FL 00000 ☐ Change Addition ☐ Delete TITLE TITLE SAPP, RODNEY D NAME MAME 1314 WEST CHURCH ST STREET ADDRESS STREET ADDRESS ORLANDO, FL 00000 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITI F ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

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12. 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 report or supplemental 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 10 or Block 11 if

FILED