2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# P09458

Entity Name: STYLE CREST TRANSPORT, INC.

Current Principal Place of Business:

2450 ENTERPRISE STREET
DRAWER A
FREMONT, OH 43420

New Principal Place of Business:

Current Mailing Address:

2450 ENTERPRISE STREET
DRAWER A
FREMONT, OH 43420

New Mailing Address:

FEI Number: 34-1315161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURTON, PHILLIP
5001 GATEWAY BLVD
UNIT 10
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: VALLE, HENRY PRES/DI
Address: 25626 BRITTANY RD
City-St-Zip: PERRYSBURG, OH 43551

Title: D/CE ( ) Delete
Name: KERN, THOMAS DIR/CEO
Address: 1520 FINEFROCK
City-St-Zip: FREMONT, OH

Title: TS ( ) Delete
Name: BURTON, PHILLIP SEC/TRE
Address: 25986 W RIVER RD
City-St-Zip: PERRYSBURG, OH

Title: D/VP ( ) Delete
Name: KERN, BRYAN T VP/DIR
Address: 2450 ENTERPRISE STREET
City-St-Zip: FREMONT, OH 43420

Title: CFD ( ) Delete
Name: FRANTZ, TYRONE G CFO/DIR
Address: 2450 ENTERPRISE STREET
City-St-Zip: FREMONT, OH 43420

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVP ( ) Change (X) Addition
Name: KERN, MICHAEL J
Address: 2450 ENTERPRISE STREET
City-St-Zip: FREMONT, OH 43420

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILLIP BURTON T/S 04/03/2009

Electronic Signature of Signing Officer or Director — Date