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

FILED Mar 05 1998 8:00am Secretary of State

DOCUMENT # 325891 (O) UTILITY TRAILER & BRAKE SERVICE, INC.						
Principal Place of Business Mailing Address						
300 - 3RD STREET, S.W. 300 - 3RD STREET, S.W.						
P.O. BOX 995 P.O. BOX 995						
WINTER HAVEN FL 33880 WINTER HAVEN FL			80		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2s. Mailing Address				···········	01/31/1968 4. FEl Number	plied For
21 26					" 	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$9.75 A	''
22		27			5. Certificate of Status Desired Fee Re	quired
City & Stat	е	City & State			6. Election Campaign Financing \$5.00	
23		28	<u>_</u>		Trust Fund Contribution Added t	
Zip 24	25 29 30			Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				II si	10. Name and Address of New Registered Agent	
WOODS, DANNY C.			*	Name		
) - 3RD STREET, S.W.		82 Street Add		dress (P.O. Box Number is Not Acceptable)	
WINTER HAVEN FL 33880			83	 	The second secon	
			Ľ	<u> </u>		
			84	City	FL 85 Zip C	Code
11, Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Statute	es, the above	/e-named co		registered
office or r	regi ste red agent, or both, in the State o	f Florida. Such change was a ions of Section 607 0505. Flo	uthorized b	y the corpor	rporation submits this statement for the purpose of changing its ation's board of directors. I hereby accept the appointment as	registered
SIGNATURE						
Oldivatoric	Signature, typed or printed name of registered agent			pen erulangia Ineg	uired when reinstaling) DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
TITLE			1.1 TITLE		L. Change	☐ Addition
NAME	JOHNSON, WAYNE K 300 3RD STR SW		1.2 NAME			
STREET ADDRESS	WINTER HAVEN FL		1	T ADDRESS		
CITY-ST-ZIP TITLE	 		1.4 CITY - 2.1 TITLE	51+ZIF	Change	Addition
NAME			2.2 NAME		Uniting of the state of the sta	
STREET ADDRESS	AAA AMM AMM A 445			T ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		2. 4 CITY			
TITLE	· · · · · · · · · · · · · · · · · · ·		3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME	1		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY - ST - ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		İ
CITY-ST-ZIP			4.4 DITY-	ST-ZIP		
TITLE			5.1 TITLE	ľ	☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY-\$1-ZIP			5.4 CITY -	ST-ZIP	Change	Addition
TITLE		☐ DECESE	6.1 TITLE		Change	Addition
NAME expect approve			6.2 NAME			}
STREET ADDRESS	·			T ADDRESS		
CITY-ST-ZIP	sertify that the information counting with	this filing does not qualify for	6.4 CITY -		n Section 119 07(3)(i) Florida Statutes I further certify that the	information

indicated on this annual report or supplied with this ming boes not quality 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, one an attachment with address.