## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** 

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 SEP 19 PM 3:21

	A94000000	A9400000314			
-1 TRAILER RENTAL	, LTD.			7117 82177 81711 88111 88112 8118 1118 1	
Mailing Address	Principal Office Address		3. Date Formed or Registered	<b>58.</b> Capital Contributions as Shown on record.	
4004 S SOTH ST TAMPA FL 33819	4004 S. SOTH STTREET TAMPA FL 33619			\$700,000.00	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		5b. Amount of Capital Contributions in FLORIDA to date:	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ Applied For	
City & State	City & State		59-3228623 7. Certificate of Status Desired	Not Applicable	
Zip Country	Zip	Country		\$8.75 Additional Fee Required  State (See reverse side for fee information)	
9. Name and A	ddress of Current Registered Agent		10. If changed, new Registere	d Agent/Office	
ZIGULICH, JOSEPH D JR 400 4 SO. 50TH ST.			e (P.O. Box Number Is Not Acceptable)		
TAMPA FL 33619		Suite, Apt #, e	alc.	FL Zip Code	
10a. Pursuant to the provisions of sector the purpose of changing its ragent. I am familiar with, and accepting	citions 620, 1051 and 620, 192, Florida Stalutes, the above-nan egistered office or registered agent, or both, in the State of Florept the obligations of section 620, 192, Florida Statutes.	ned limited partners orida. Sych change	-09/20	he State of Florids automits this state (IIII) t	
	IER THAT IS A CORPORATION, MUST BE REGISTERED AN	LIMITED I		R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	Address of Feeb Gone	-LDt	11b. City, State & Zip Code	11c. Registration/ Document Number	
FLORIDA TRANSCO, INC.	1111 BRD AVE. WEST, 4	<b>&gt;</b>	BRADENTON FL 04205- TAMPA, FL 3-3619	P94000018994	
• "				9-19	
W ,					
Note : General partners	MAY NOT be changed on this for	m; an amei	ndment must be filed to ch	ange a general partner.	
	tion supplied with this filing is voluntarily furnished and does a			<del></del>	

Corporations from any liability of non-compliance with trist situation 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

Zigulich PAES

Daytime Telephone Number 813 -623-1414