SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 AM 11:21

DOCUMENT # F94000006055 (7)

1. Corporation Name
ATLAS TRAILING CORPORATION

Principal Place of Business
106 WEST MISSISSIPPI AVENUE
RUSTON LA 71270

Mailing Address
106 WEST MISSISSIPPI AVENUE
RUSTON LA 71270

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/28/1994
3a. Date of Last Report:
4. FEI Number: 72-0861593 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ________ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	11 TITLE	☐ Change ☐ Addition
NAME	HUBERT JR, L A	12 NAME	
STREET ADDRESS	78 YELLOWSTONE DR.	13 STREET ADDRESS	
CITY-ST-ZIP	NEW ORLEANS LA	14 CITY-ST-ZIP	
TITLE	~~VD~~	21 TITLE	VDT ☒ Change ☐ Addition
NAME	BOSPFLUG, LANCE F	22 NAME	BOSPFLUG, LANCE F.
STREET ADDRESS	2700 LOVERS LANE	23 STREET ADDRESS	2700 LOVERS LANE
CITY-ST-ZIP	RUSTON LA	24 CITY-ST-ZIP	RUSTON, LA
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	LOVE, JIMMY	32 NAME	
STREET ADDRESS	530 N. CHAUTAUQUA	33 STREET ADDRESS	
CITY-ST-ZIP	RUSTON LA	34 CITY-ST-ZIP	
TITLE	~~T~~	41 TITLE	☐ Change ☐ Addition
NAME	~~ECHOLS, GLENN~~	42 NAME	
STREET ADDRESS	~~2107 N VIENNA~~	43 STREET ADDRESS	
CITY-ST-ZIP	~~RUSTON LA~~	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] JIMMY LOVE — JUNE 12, 1995 — (318)255-7912
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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