SECOND	NOTICE: CORPORATION WILL B	E DISSOLVED ON OR AFTER	AUGUST 7, 1996.		
COF ANNU	ON OR BEFORE 877/96: \$225 (IF DIS PROFIT RPORATION JAL REPORT	FLORIDA DEPAR Sandra B Secretar	ETO REINSTATE: \$375.) ETMENT OF STATE B. Mortham By of State CORPORATIONS		
DOCUI	MENT # L1339	2 (0)			
	TRAILER AND R.V. SALES	` '			
TONIO	TIMEET AND HAT SALES	, IIIO			I <b>Bib</b> ir <del>Bibir Bibir Bibir Bibir Bibir Bibir Bibir</del> Bibir
Principal Place	e of Business	Ma ling Address			! BIBIT BEBIT BIBIT BIBIT BIBIT BIBIT BEBI
6347 U.S. HIG RIVERVIEW FU	SHWAY 301 SOUTH L 33569	6347 U.S. HIGHWAY 301 RIVERVIEW FL 33569	SOUTH		
		Bone & Wy	bence + Brad	3. Date Incorporated or Qualified 08/31/1989	3a. Date of Last Report 03/23/1995
2. Principal P	lace of Business	Boue Wy  2n. Mailing Address	P. (	59-2881186	Applied For
Suile, Apt	Pauls DR.	26 1500 We Suite, Apt #, etc.	ST High		Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	indon Fla.	City & State Plea	asant Mi.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 335	Country 25 US	Zip 29 48858	Country	8. This corporation has liability for Florida Statutes	otang b'e tax under s. 199 032 Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
DAILET, ITIOMAS G					aley
RIVERVIEW FL 33569				ess (P.O. Box Number is Not Acceptable)	(e) <b>1</b>
			83		
			84 City	randon	FL 85 Zip Code 23511
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 307.1508, Florida Statute e of florida. Such change was a	es, the above-named corpultionized by the corporation	oration submits this statement for the property accept	rpose of changing its registered the appointment as redistered
	m familiar with and accept the oblig	gations of, Section 607.0505, Flo	rida Statutes	on's board of directors. Thereby accept	
SIGNATURE	Signature typed or printing name or constered as		E Registered Agent signature requir	ed when renstating)	E-S/E
12.	OFFICERS A	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12  Change Add tion
NAME	BAILEY, LARRY		1.2 NAME		ERS AND DIRECTORS IN 12  Change Add tion
STREET ADDRESS	6347 US HWY 301 SOUTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL		1.4 CITY - ST - ZIP		Change Addition
TITLE	V Bailey, Douglas	DELETE	2 1 TITLE		Change Addition   9
NAME STREET ADDRESS	6347 US HWY 301 SOUTH		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL		2 4 CITY-ST-ZIP		
TITLE	ST	DELETE	3 1 TITLE		Change Addition
NAME	BAILEY, CECIL G.	, ,	3.2 NAME		
STREET ADDRESS	6347 US HWY 301 SOUTH		3 3 STREET ADDRESS		
CITY - ST - ZIP TITLE	INTERVIETT FE	DELETE	34 C/IY - ST - ZIP 41 TITLE		Change Addition
NAME		<u></u>	4. 2 NAME		County [ 10000001
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP			4.4 CITY - ST - ZIP		~~~~
TITLE		DELETE	5 1 TITLE		Change Addition
NAME CTREET ADDRESS			5 2 NAME		
STREET ADDRESS CITY+ST-ZIP			5 3 STREET ADDRESS 5 4 CHY - ST - ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - ST - 7IP			6.4 C(TV - ST - Z)P		

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 out, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE AND PPED OF PINTED NAME OF SIGNING OFFICEROR DIRECTOR

Balley

Day 10-3ky-94/6