FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 23 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # L87410 (1)PC TRANSPORT, INC. Principal Place of Business Mailing Address 8626 RICHLAND SCHOOL ROAD 8626 RICHLAND SCHOOL ROAD ZEPHYRHILLS FL 33540 ZEPHYRHILLS FL 33540 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3019337 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. ☐ No g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LINDSEY, CAROL ANN 8626 RICHLAND SCHOOL ROAD Street Address (P.O. Box Number is Not Acceptable) ZEPHYRHILLS FL 33540 83 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 (NOTE. Registered Agent signature required when reinstating) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE TITLE NAME LINDSEY, CAROL ANN 1.2 NAME STREET ADDRESS 8626 RICHLAND SCHOOL RD. 1.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE STD 2.1 TITLE LINDSEY, CAROL ANN NAME 2.2 NAME 8626 RICHLAND SCHOOL RD. 2.3 STREET ADDRESS STREET ADORESS ZEPHYRHILLS FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address 201 Pres. X1-15-98 352-567-6422

14. I hereby certify that the information supplied with this filing does not qualify 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

CITY-ST-ZIP