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

STREET ADDRESS

CIGNATUDE:

CITY-ST-7IP

FILED PROFIT Apr 22 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (0)INTERNATIONAL BUS & PARTS, INC. Principal Place of Business Mailing Address 2055 SPRINT BLVD 2055 SPRINT BOULEVARD, SUITE D SUITE D P O BOX 1009 APOPKA FL 32703 APOPKA FL 32704-8009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/29/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3026223 Not Applicable Suite. Ant. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name RUNFOLA, VINCENT A **544 SPRING HOLLOW BLVD** 82 Street Address (P.O. Box Number is Not Acceptable) APOPKA FL 32712 83 84 City Zip Code 85 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. (NOTE Registered Agent signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DOLLETE THILE 1.1 TOLE Change noilibbA RUNFOLA, VINCENT A. NAME 1.2 NAME 544 SPRING HOLLOW BLVD. STREET ADDRESS 1.3 STREET ADDRESS APOPKA FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 2 1 TITLE Addition RUNFOLA, ANITA L NAME 2.2 NAME 544 SPRING HOLLOW BLVD. STREET ADDRESS 2.3 STREET ADDRESS APOPKA FL CITY ST- ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3 1 11TLF Addition RUNFOLA, VINCENT A NAME 3.2 NAME 544 SPRING HOLLOW BLVD. STREET ADDRESS 3.3 STREET ADDRESS APOPKA FL CITY-ST-ZIP 3.4 City-St-ZiP DELETE TITLE Change Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZIP 4.4 CITY - ST - ZIP DELF 1E TILLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CI1Y - \$1 - ZIP 54 CITY-ST-ZIP DETETL TITLE 61 TITLE ☐ Change Addition NAME 62 NAME

63 STREET ADDRESS

64 CHY-ST-ZIP 14. Thereby 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 it 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 affactiment with an address

ANITA L. RIWFOLA

4.14.98

407.880-9700