File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 FEB 22 AH 8: 58 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETART OF STATE TALLAHASSEE, FLORIDA \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # M96000000249** 1a. Principal Place of Business Address SELECTRUCKS OF TAMPA L.L.C. 6203 E. HILLSBOROUGH AVENUE 6308 HILLSBOROUGH TAMPA FL 33610 TAMPA FL 33610 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 07/11/1996 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 93-1209222 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country Zip Zipi \$8 75 Additional Fee Required 04/02/1998 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Suite. Apt. # etc. Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. (Registered Agent Accepting Appointment) (NOTE Registered Agent's grature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 6308 HILLSBOROUGH MGR GUNTER, J R TAMPA FL 500002789305--1 -02/26/99--01109--021 ****188.75 ****188.75 51,25 AS 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address SJGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

INHSE10 R (12-98)