# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Aug 01, 2002 8:00 am**
**Secretary of State**
08-01-2002 90168 026 ***150.00

DOCUMENT # R01000116335

1. Entity Name
S & M Truck World I, Inc.

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97195

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| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 2223 Buena Vista D<br>Suite, Apt. #, etc. | 2223 Buena Vista DR<br>Suite, Apt. #, etc. |
| City & State: Clearwater | City & State: Clearwater |
| Zip: Fl / County: Pinellas | Zip: 33764 / County: Pinellas |

4. FEI Number: 59-3760486 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: FRANK J Letteri

Street Address (P.O. Box Number is Not Acceptable): 2223 Buena Visat DR

City: Clearwater Fl FL Zip Code: 33764

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | FRANK J Letteri<br>2223 Buena Vista DR<br>Clearwater Fl 33764 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MARY ANNE D Letteri<br>2223 Buena Vista DR<br>Clearwater Fl 33764 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | |

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CR2E043 (12/01)

12. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 7-29-02 727 847 0860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
9/15/95

Division of Corporations,

Back on April 15th I sent The Form UBR and A check For $150.00. Today is July 29th I have not seen A cancled check At this time. So I will put A Stop Payment on that check And issue Another one At this time, Im Sorry For this inconvienance. Please accept this Check For 150.00 IF there is Any Problems Contact me At 727-847-0860 FRANK J Letten.

Thank you

PS I Called your # 850 488 9000 And The person told me to download this Form And Reissue A check And you would Contact me if there is Any questions.

Thanks