


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 09, 2004 8:00 am**  
**Secretary of State**


07-09-2004 90008 032 \*\*\*150.00

<b>DOCUMENT # P03000065048</b> 1. Entity Name WHEELS TRANSPORT, INCORPORATED					
Principal Place of Business 1610 24TH ST SE RUSKIN, FL 33570			Mailing Address 1610 24TH ST SE RUSKIN, FL 33570		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  LAWSON, MONICA Z 2403 STATE STREET TAMPA, FL 33609				7. Name and Address of New Registered Agent  Name: <u>MARY K BLAZEWICH</u> Street Address (P.O. Box Number is Not Acceptable): <u>11105 LAKE SASSA DR</u> City: <u>Thonotosassa</u> FL Zip Code: <u>33592</u>	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Mary K Blazewich</u> DATE: <u>7/2/04</u> <small>(Signature, typed or printed name of registered agent and title is applicable) (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> <small>In accordance with s. 607, 1974(2)(b), F.S., the corporation did not receive this prior notice.</small>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BABIK, THOMAS J 1610 24TH ST SE RUSKIN, FL 33570		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Thomas J Babik</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Pres <u>813-645-9448</u> <small>Date Daytime Phone #</small>		

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Attachment

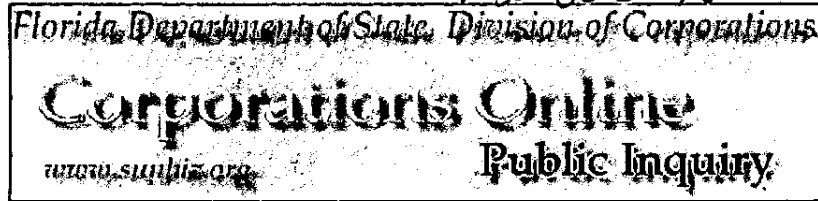
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<b>DOCUMENT # P03000065048</b> 1. Entity Name WHEELS TRANSPORT, INCORPORATED					
Principal Place of Business 1610 24TH ST SE RUSKIN, FL 33570			Mailing Address 1610 24TH ST SE RUSKIN, FL 33570		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	07022004    Chg-P    CR2E034 (10/03)	
4. FEI Number				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LAWSON, MONICA Z 2403 STATE STREET TAMPA, FL 33609			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BABIK, THOMAS J		NAME		
STREET ADDRESS	1610 24TH ST SE		STREET ADDRESS		
CITY-ST-ZIP	RUSKIN, FL 33570		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
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<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date				Daytime Phone #	

Attachment

P03000065048

5/26/06 9



## Florida Profit

### WHEELS TRANSPORT, INCORPORATED

#### PRINCIPAL ADDRESS

1610 24TH ST SE  
RUSKIN FL 33570

#### MAILING ADDRESS

1610 24TH ST SE  
RUSKIN FL 33570

Document Number  
P03000065048

FEI Number  
NONE

Date Filed  
06/09/2003

State  
FL

Status  
ACTIVE

Effective Date  
NONE

## Registered Agent

Name & Address
LAWSON, MONICA Z 2403 STATE STREET TAMPA FL 33609

## Officer/Director Detail

Name & Address	Title
BABIK, THOMAS J 1610 24TH ST SE RUSKIN FL 33570	PD

## Annual Reports

Report Year	Filed Date
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Attachment

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Previous Filing

Return to List

Next Filing

No Events

No Name History Information

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### Document Images

Listed below are the images available for this filing.

06/09/2003 -- Domestic Profit
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**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

<b>Corporations Inquiry</b>
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<b>Corporations Help</b>
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