

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90253 004 ***150.00

DOCUMENT # P26618

1. Corporation Name

NATIONAL SEMI-TRAILER CORP.

Principal Place of Business

6015 PARDEE ROAD
TAYLOR MI 48180

Mailing Address

7208 SAND LAKE ROAD
STE 202
ORLANDO FL 32819
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1989

4. FEI Number

38-2148290

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D BROMLEY, RANDALL E**
STREET ADDRESS **7208 SAND LAKE ROAD SUITE 202**
CITY-STATE-ZIP **ORLANDO FL**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D BROMLEY, JOSEPH C.**
STREET ADDRESS **3013 LINDENWOOD DR.**
CITY-STATE-ZIP **DEARBORN MI**

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D BURNETT, LOUIS**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

1.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D BURNETT, LOUIS**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

2.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

3.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

3.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

3.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

4.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

4.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

4.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

5.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

5.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

6.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

6.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D CLEMENTE, JOSEPH**
STREET ADDRESS **6015 PARDEE**
CITY-STATE-ZIP **TAYLOR MI**

6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **S GOSCHINSKI**
STREET ADDRESS **7208 SAND LAKE ROAD, SUITE 202**
CITY-STATE-ZIP **ORLANDO FL 32819**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gerald C. Goschinski - Secretary 4-21-99

CR2E034 (1/98)

0100451