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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** P93000047374 (2) FANCY PANTS HAULING, INC. Principal Place of Business Mailing Address 2107 NEW BERLIN RD 2107 NEW BERLIN RD JACKSONVILLE FL 32218 JACKSONVILLE FL 32218 3. Date Incorporated or Qualified 3a. Date of Last Report 07/07/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3191906 Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. 22 5. Certificate of Status Desired \$8.75 Additional Fee Required City & State City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GILDER, DOROTHY Street Address (P.O. Box Number is Not Acceptable) 82 2107 NEW BERLIN RD JACKSONVILLE FL 32218 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE **PSD** DELETE 1.1 TITLE Change ☐ Addition NAME GILDER, DOROTHY 1.2 NAME STREET ADDRESS 2107 NEW BERLIN RD 1.3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32218 1.4 CITY-ST-ZIP TIFLE VTD DELETE 2 1 TITLE Change ■ Addition NAME SALTS, ELAINE 2.2 NAME STREET ADDRESS 2107 NEW BERLIN RD 2.3 STREET ADDRESS CITY-SI-ZIP JACKSONVILLE FL 32218 2.4 CITY-ST-ZIP THUE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-ZIP 34 CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition NAMÉ 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5. 1 TITLE ☐ Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE ☐ DELETE 6. 1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental funual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 changed, or on an attachment with an address.

SIGNATURE:

CR2E034 (12/95)