FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham*+; Secretary of State DIVISION OF CORPORATIONS

1996

P93000068512 (1) DOCUMENT #
1. Corporation Name

CARDIN'S TRUCK AND FOUIPMENT REPAIR. INC.

CANDIN					
Principal Place o	f Business	Mailing Address			ni dassi quala usias seidi usias sida sida sida
2600 KIRBY RI UNIT 101	-	2600 KIRBY RD UNIT 101			
PALM BAY FL 32905 US		PALM BAY FL 32905 US		3. Date Incorporated or Qualified	3a. Date of Last Report
				09/30/1993 4. FEI Number	07/25/1995 Applied For
2. Principal Plac		2a. Mailing Address	A. (& . ()	59-3206085	Not Applicable
21 2 5 90 Suite, Apt. #,	KIRBY AVE NE	26 2.5 90 K+R&Y Suite, Apt. #, etc.	AVE NE		\$8.75 Additional
Suite, Apr. #,	U.G	27 1		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
PALM	BAY FL	28 PALM BAY	FL	Trust Fund Contribution	Added to Fees
Ζιρ	Country	Ziρ	Coun ry	8. This corporation has liability for	intangible tax under s. 199.032,
24 32905	25 U S 9. Name and Address of Curre	11 4- 1-2	30 05	Florida Statutes Yes 10. Name and Address of New F	
	3. Isalic bio Address of Culter	in riogistored agent	81 Name		
TOADED	LOUD			July 100 Day Number in Not Assessed	ola)
TRADER,	j. Kudi Trawbridge ave		82 Street A	ddress (P.O. Box Number is Not Acceptat	леј
	RNE FL 32901		83		
MELDOU	THIL I C OCOU!		84 City		85 Zip Code
					FL 1
or registered	the provisions of Sections 607,050, diagent, or both, in the State of Flor , and a cept the childrens of, Sec	iou. Such change was authorized too 607,0505, Horida Stautes.	the above-named corby the ocrporation's b	rporation submits this statement for the puboard of directors. I hereby accept the app	irpose of changing its registered office opinitment as registered agent. I am
12.	OFFICERS AN	ND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	PSD	DELETE	1. 1 TIF.E	P/D	Change Addition
NAME	CARDIN, PHILLIP		1.2 NAME	CARDIN, PHILLIP	
STREET ADDRESS	1291 RIDGE ROAD, NORTH	IEAST	1.3 STREET ADORESS	ISG4 CYPRESS WOOD	S CIRCLE
CITY-ST-ZIP	PALM BAY FL		1.4 CIT / - ST - ZIP		+ 772
TITLE		DEFELE	2 1 T+T.E	•	Change Addition
NAME			2.2 NAME	NORMAN, VIVIAN	
STREET ADDRESS			2.3 STREET ADDRESS	719 HABERSHAM RO	
CITY-ST-7:P		F100.110	2.4.CIT+-ST-ZIP	VALDOSTA GA 3160	Change Addition
THILE		DELETE	3 1 TiT.E	T/5	Thomas Examina
NAME			3.2 NAME 3.3 STHEFT ADDRESS	SEGLER, SID	6 NE
STREET ADDRESS				PALM BAY FL	32905
CITY+ST-ZIP TITLE		DELETE	3 4 C(T) - ST - Z(F) 4 1 T(L) F	FREM OFT FE	Change Addition
NAME		tuni yezana	4.2 NAME		
STREET ADDRESS			4.3 STFEET ADDRESS		
CITY-ST ZIP			44 CITY - ST - 7:P		
TITLE		DELETE	5 1 Int.E		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE	A 11/4 1 V	☐ DELETE	6 ITL.E		Change Addition
NAME			6.2 NA√E		
STREET ADDRESS			6 3 STHEET ADDRESS		
CITY -ST - ZIP		. 42	6.4.0(1) - \$1 - 7(F)		
certify that	the information indicated on this and an officer or director of the cord	oual record or supplicatental agous	al report is true and ac empowered to execut	dify for the exemption stated in Section 119 curate and that my signature shall have th e this report as required by Chapter 607, f	e same igoai effect as il made uniger

SIGNATURE:

(407) 724-8225