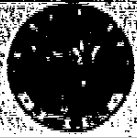


PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morrison
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUN 19 PM 3:23

DOCUMENT # P93000088274 (4)

1. Corporation Name
RAPID TRANSIT SALES, INC.

Principal Place of Business Mailing Address
3632 US HWY 92 SUITE 2 LAKELAND FL 33801 **3632 US HWY 92 SUITE 2 LAKELAND FL 33801**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
12/20/1993 **05/01/1994**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number Applied For
APPLIED FOR 59-3231187 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PERGOLA, JAMES L
 3632 US HWY 92
 SUITE 2
 LAKELAND FL 33801**

B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City FL B5 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
 NAME **PERGOLA, JAMES L**
 STREET ADDRESS **3632 US HWY 92 SUITE 2**
 CITY - ST - ZIP **LAKELAND FL 33809**

1 1 TITLE Change Addition
 1 2 NAME
 1 3 STREET ADDRESS
 1 4 CITY - ST - ZIP

2 1 TITLE Change Addition
 2 2 NAME
 2 3 STREET ADDRESS
 2 4 CITY - ST - ZIP

3 1 TITLE Change Addition
 3 2 NAME
 3 3 STREET ADDRESS
 3 4 CITY - ST - ZIP

4 1 TITLE Change Addition
 4 2 NAME
 4 3 STREET ADDRESS
 4 4 CITY - ST - ZIP

5 1 TITLE Change Addition
 5 2 NAME
 5 3 STREET ADDRESS
 5 4 CITY - ST - ZIP

6 1 TITLE Change Addition
 6 2 NAME
 6 3 STREET ADDRESS
 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 annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES L PERGOLA

6/12/95 **813 667-1866**
 Date (Typed Phone #)

CP2E034 (3/95)