

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **P94000036216 (7)**

1. Corporation Name

**ROBERT'S SEMI TRAILER REPAIR INC.**



Principal Place of Business

505 EDWARD STREET  
JACKSONVILLE FL 32206  
US

Mailing Address

1511 JOHNSON LANE  
YULEE FL 32097  
US

3. Date Incorporated or Qualified

05/09/1994

3a. Date of Last Report

04/28/1995

2. Principal Place of Business

21 5050 Edward St.

2a. Mailing Address

26

4. FEI Number

59-3240076

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

SMITH, ROBERT E  
1511 JOHNSON LANE  
YULEE FL 32097

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 of the person filing this report (Sign in blue ink)

Signature of Agent (Sign in blue ink)

DATE

12. OFFICERS AND DIRECTORS

TITLE V  
NAME SMITH, PEGGY  
STREET ADDRESS 1511 JOHNSON LANE  
CITY-ST-ZIP YULEE FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE President  
12 NAME Robert E. Smith  
13 STREET ADDRESS 1511 JOHNSON LN  
14 CITY-ST-ZIP Yulee, FL. 32097

Change

Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

Change

Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

Change

Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

Change

Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

Change

Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

Change

Addition

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:

*Peggy Smith*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96

Date

704  
696-8758

Daytime Phone #

CR2E034 (12/95)