FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:45

DOCUMENT # P94000090111 (3)

1. Corporate Name
SOLO TRUCKING, INC.

Principal Address
2208 N. 38TH ST
TAMPA FL 33605

Mailing Address
2208 N. 38TH ST
TAMPA FL 33605

FOR DEPARTMENT OF STATE USE

3. Date Incorporated (Formed) 12/12/1994

3a. Date of Last Report new

2. Previous Corporate Name
21

2a. Mailing Address
26

Trade Name
22

Trade Name
27

City State
23

City State
28

Zip County
24 25

Zip County
29 30

4. FEI Number 59-3259558
Applied For
Not Applicable

5. Certificate of Status (Amend) [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. The corporation has filed, or intends to file, a Form 1120 Florida Statute. [ ] Yes [X] No

9. Name and Address of Current Registered Agent

DOPP, EMERY L
2208 N. 38TH ST.
TAMPA FL 33605

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 Section 607.0505 of the Florida Statute, 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. Thereby, I accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 Florida Statute.

SIGNATURE

12. OFFICERS AND DIRECTORS

President
Emery L Dopp
10411 N. Oregon Av
Tampa, FL 33612

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 19

[ ] Change [ ] Addition

REMITTED BY MAY 1

14. I hereby certify that the information contained herein, to the best of my knowledge, is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that the information indicated on this report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am familiar with and accept the obligations of section 607.0505 Florida Statute.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EMERY L. DOPP

April 10,1995 (813)247-7773
Date Daytime Phone

0291350 CP