SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

9035 17TH PLACE

VERO BEACH FL 32968

PROFIT CORPORATION ANNUAL REPORT 1998

Principal Place of Business

9035 17TH PLACE

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

VERO BEACH FL 32968



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000024928 (0)

INDIAN RIVER TRACTOR REPAIR & SALES, INC.

3. Date Incorporated or Qualified 03/18/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For Not Applicable 65-0561029 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **ROLLINS, DONALD 9035 17TH PLACE** Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32968 83 City 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 DATE (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE 1.1 TITLE __ DELETE Change Addition OHMSTEDE, RON NAME 1.2 NAME 2148 17TH ST STREET ADDRESS 1.3 STREET ADDRESS **VERO BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP 2.1 TITLE TITLE DELETE Change Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE TITLE DELETE ___ Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14.1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

Change

___ Addition

Change Addition

FILED

Jul 23 1998 8:00am

DO NOT WRITE IN THIS SPACE

Secretary of State

CR2E034 (5/98)