1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000028884

1. Corporation Name

CARL E. STEWART TRUCKING SERVICES INC.

Principal	F'lace	of	Business

Mailing Address

2006 JIM REDMAN PARKWAY PLANT CITY FL 33566

2006 JIM REDMAN PARKWAY PLANT CITY FL 33566

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90033 021 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

04/12/1995

2. Principal P	Place of Business 2a. Mailing Address			4. FEI Number Applied For						
21	26			59-3307165	No	: Applicable				
	F.pt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75				
22	27					3. Certificate of Status Desired	Fee Re	quired		
City & Stat	City & State			6. Election Campaign Financing	\$5.00	Vlay Be				
23	28			_	Trust Fund Contribution	Added t) Fees			
Zip	Country	Zip Country		<u>-</u>	8. This corporation owes the current year In	tangible				
24	25	29	30			Personal Property Tax.	☐ Yes	□No		
	9. Name and Address of Curren	Registered Agent		Ĺ.,		10. Name and Address of New Registered	Agent			
				81	Name					
STEWART, LINDA S 2006 JIM REDMAN PARKWAY PLANT CITY FL 33566			82 Street Address (P.O. Box Number is Not Acceptable)							
				83						
				84	City 85 Zip Code					
				04	City	FL	_ 65 Z 15 \	Joue		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida State	tes, the a	bove	e-named corpo	oration submits this statement for the purpose o	changing its	egistered		
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.										
_	in amino with and accept the congar	51.5 51, C 5500011 567 15665, 11		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				į		
SIGNATUF:E	Signature, typed or printed name of registered agent	and title if applicable. (NO	T ≣: Registered	Agen	t signature required	d when reinstating) DATE				
12.	OFFICERS AN	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS 4	ND DIRECTO	RS IN 12		
TITLE	D	☐ DELETE	1.1 TO	rt.E			Change	Addition		
NAME	STEWART, CARL E		1.2 N	WE.				İ		
STREET ADDRESS	2006 JIM REDMAN PARKWAY		1.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	PLANT CITY FL 33566		1.4 CI	TY-ST	r-ZIP					
TITLE	D	☐ DELETE	2.1 10	TLE.			Change	☐ Addition		
NAME	STEWART, LINDA S		2.2 N	ME				{		
		2.3 \$1	REET	ADDRESS						
CITY-ST-ZIP	DI ANTE OUTV. EL GOZGO		2.4 C	ITY-S	T- ZIP					
TITLE			3171	īLΕ			Change	☐ Addition		
NAME	_		3.2 N/	\ME				1		
STREET ADORE 3S			3.3 51	REET	ADDRESS					
CITY-ST-ZIP			34. C	ITY-S	T-ZIP					
TITLE		DELETE	4.1 TI				☐ Change	Addition		
NAME			4.2 N	AME	ļ			ļ		
STREET ADDRESS			4.3 ST	REET	ADDRESS					
CITY-ST-ZIP			4.4 CI					Ì		
TITLE		☐ DELETE	5.1 TI				Change	Addition		
NAME		_	5.2 N							
STREET ADDRESS			5.3 \$1	REET	ADDRESS					
CITY-ST-ZIP			5,4 CI	TY-S1	r-ZIP)		
TITLE		DELETE	6.1 TI				☐ Change	Addition		
I NAME		_ :	6.2 N	AME.			_	(
			63S1	REET	ADDRESS					
STREET ADDRES S			6.4 Ci							
CITY-ST-ZIP)		0.7 0					1		

14. I 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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)