## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000037311 (3)

FIRE TRUCKS LTD., INC.

Principal Place of Business		Mailing Address 205 SMITH RD								
MERRITT ISLAND FL 32953		RRITT ISLAND FL 32	953-8325			de la companya de la				
						corporated or Qualified	3a. Dat	e of Last R	eport	
2. Principal Place of Business	<u></u>	Mailing Address			4. FEI Nui	nber -3384544	1	<del> </del>	plied For	
Suite, Apt. #, etc.	26	Suite, Apt #, etc.		<del></del>				\$8.75	Applicable	
Linear control of the		27			5. Certific	Certificate of Status Desired     Fee Required				
City & State		City & State			1	6. Election Campaign Financing \$5.00 May Be				
<b>23</b> Zip (	Country 28	Ζιρ	Country	<del> </del>		und Contribution rporation has liability for	iotopolible	Added 1		
24 25	29		30		Florida	Statutes [	Yes [	] No	. 199,032,	
	Address of Current Regis	tered Agent			10. Name	and Address of New R	egistered A	gent		
MCDERMOTT, DAN			81	Name	CHAEL	BLASKY				
1970 MICHIGAN AVE, BLDG E  82 Street Add COCOA FL 32922					CHAEL BLASICY  Iress (P.O. Box Number is Not Acceptable)  SMITH ROAD					
COCOA PL 32822			83		۲۰۰۱۱	KOND				
			84	City				<b>85</b> Zip	Code	
				ME		ISLAND	FL	32	953	
<ol> <li>Pursuant to the provisions office or registered agent.</li> </ol>	or both, in the State of Floric	ta. Such change wa	s authorized b	v the corpora	rporation submi ation's board of	ts this statement for the directors. I hereby acce	purpose of pt the appo	changing it sintment as	s registered registered	
	nd accept the obligations of	_		_	222	. 1	20/0	-		
SIGNATURE Stg: ature, typed or per	teu name of registered agent and tille	APPlicable (N	OTE: Registered Ag	A6KY ent signature req	PR-55	17	CATE OATE	<u></u>		
12.	OFFICERS AND DIREC		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIC	INS/CHANGES TO OFFI	CERS AND			
THE D	MI I I PI	☐ DELETE	11 TITLE				1	Change	Addition	
NAME BLASKY, MIC STREET ADDRESS 205 SMITH R			1.2 NAME	ADDRESS						
	AND FL 32953		1.4 CITY-	- 1						
TITLE D		DELETE	2.1 TITLE	<u> </u>		······································		Change	Addition	
NAME BURNS, DOL			2.2 NAME			•				
STREET ADDRESS 831 O'HARA			2.3 STREE	r address						
CHY-ST-ZIP ROCKLEDGE	FL 32955	DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP				Change	Addition	
NAME			3.1 HEL.					onengo	L Addition	
STREET ADDRESS				TADDRESS						
CITY-ST-7:P			3.4. CITY-	ST-ZIP						
BILE		☐ DELETE	4.1 TITLE				, ,	☐ Change	Addition	
NAME			4. 2 NAME	J	"					
STREET ADDRESS			4.3 STREE 4.4 City-	T ADDRESS						
CITY-S1-70P		DELETE	5.1 TITLE	31-21				Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	T ADDRESS						
CITY - ST - ZIF			5.4 CITY-	ST - ZIP					- <b>y</b>	
TITLE		L DELETE	6.1 TITLE					L Change	Addition	
NAME:			6.2 NAME							
STREET ADORESS   CITY-ST-ZIP			6.4 CITY -	T ADDRESS						
14. I do hereby certify that the	information supplied with th	is filing does not qu	alify for the ex-	emption state	ed in Section 11	9.07(3)(i), Florida Statut	es. I further	certify that	the	
Lam an officer or director in	is arinual report or supplem of the corporation or the rec ick 13 if chariged, or on an a	eiver or trustee emp	owered to exe	urate and th cute this rep	nat my signature port as required	snall nave the same leg by Chapter 607, Florida	jai enect as Statutes; ar	if made un id that my i	oer oath; that name	

1/20/07 (407) 452-1471

**FILED** 

Feb 11 1997 8:00am

Secretary of State