FILE NOW: FILING FEE AFTER MAY 1 IS \$550 DO

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Morth

STATE

Secretary of Stat

DIVISION OF CORPORTIONS

DOCUMENT # P96000040552 (7)

HERE'S FRED TRAILERS & TOPPERS, INC.

Principal Place of Business

Mailing Address

FILED May 13 1997 8:00am Secretary of State



19637 BEACH BLVD JACKBONVILLE FL 82248			13637 BEACH BLVD JACKSONVILLE FL 32224-1205							
						3. Date Incorporated or Qualified 05/01/1996	3a. Date of L	ast Repoi	rl	
2. Principal Plac	ce of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For			1
21		26	26			59-3375420 Not Applie			plicable	1
Suite, Apt. #,	etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional			tional	ĺ
22		27	27]			5. Certificate of Status Desired		ee Requir		ı
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28	28			Trust Fund Contribution				
Zip	Country	Zip	D Cour		/	8. This corporation has liability for intangible tax under s. 199.0				
24	25 29 30			l	Florida Statutes X Yes No]
1/5	9. Name and Address of Cur	rent Registered Agent			,	10. Name and Address of New Re	gistered Agent			ļ
	EDWARD C			81	Name					
	ependent dr : 2301			82	Street Add	ess (P.O. Box Number is Not Acceptable)				1
	SONVILLE FL 32202			83						
	OVITION I CONTRACT			00						
				84	City		FL 85	Zip Cod	e	
11. Pursuent to	the provisions of Sections 607 (0502 and 607 1508 Fig	rida Statutos 1	the abov	p-named cor	moration submits this statement for the n	1	ing its re	nistered	
office or reg	istered agent, or both, in the St familiar with, and accept the of	late of Florida. Such cha	ange was auth	orized by	y the corpora	poration submits this statement for the pation's board of directors. I hereby accep	of the appointme	nt as regi	istered	
	tamiliar with, and accept the or	inganoris or, section 60	7.000 0, FIDHOS	a Statuto	S.					
SIGNATURE	gnature, typed or printed name of registered	t agont and title d applicable	(NOTE: Re	gistered Ag	ent signature requ	uired when reinstating)	DATE			
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN	112	Í
TITLE	U		DELETE	1.1 TITLE			☐ Ch	ange [Addition	٥
	AKEL, FRED A			1.2 NAME						2
	13637 BEACH BLVD			1.3 STREET ADDRESS						Ì
CITY-ST-ZIP	JACKSONVILLE FL 32246				ST-ZIP					2
TITLE			DELETÉ	2.1 TITLE			☐ Ch	ange [Addition	C
NAME										
STREET ADDRESS					1 ADDRESS					
CITY-ST-ZIP				2. # CITY-	ST-ZIP					
THTLE			DELETE	3.1 7171.6			LJ Ch	ange [Addition	
NAME										
STREET ADDRESS				3.3 STRECT	T ADDRESS					
CITY-ST-ZIP				3.4. CHY-	ST-ZIP					
TITLE		L	DELETE	4.1 TITLE			L_J Ch	ange L_	Addition	1
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	1 ADDRESS					
CITY-ST-ZIP		····	OF LET	4.4 C(1Y-	S1-ZIP			·	7	1
TITLE		<u>L.</u> J	DELETE	5.1 1111€			L Ch	ange	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE	1 ADDRESS					Ì
CITY-ST-ZIP	VALUE OF A PART AND A STATE OF A		britar	5.4 C(1Y -)	S1-ZIF				7	-
TITLE		LJ _.	DELETE	6.1 1111.6			∐ Ch	ange L	Addition	1
NAME				6.2 NAME						1
STREET ADDRESS				6.3 STREE	1 ADDRESS					
CITY-ST-ZIP	a katification at a first surface and		a water the	e\$City:		dia Capita 440 07(0)(2) First In Co.	(C.al	. 11 1 - 1		-
ACOURING I CO	certify that the information supp	DIRECT WITH THIS HIND GOOD	a not quality (c	л ине ехе	ambuon state	ed in Section 119 07(3)(i), Florida Statute	s. i illininer certifi	z mai ine.		1

1 do hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119 07(3)(i). Florida Statuties. I further certify that the information indicated on this annual report or applicant arnual 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 incervious formation of the corporation of the incervious formation of the corporation of the incervious formation of the corporation o

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