

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 DEC 15 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000070279**
1. Corporation Name
TRUCKS AND CARS FOR YOU, INC

Principal Place of Business Mailing Address
2730 N. ORANGE BLOSSOM TR
ORLANDO, FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
8-23-96

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 2730 N. ORANGE BLOSSOM TR	26 32nd	59-3395612	<input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	8. This corporation owes the current year Intangible Personal Property.	<input type="checkbox"/> Yes <input type="checkbox"/> No
23 ORLANDO, FL	28		
Zip	Country		
24 32804	25 USA		
	29		
	30		

9. Name and Address of Current Registered Agent

ROBERT B HEATH
936 OAKPOINT CIR
APOPKA, FL 32804

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 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 **ROBERT B HEATH** **Robert B Heath** **11-9-99**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOE D. HODGES	1.2 NAME	ROBERT B HEATH
STREET ADDRESS	1850 Lee Rd	1.3 STREET ADDRESS	2730 N. O.B.T.
CITY-STATE-ZIP	WINTER PARK, FL 32789	1.4 CITY-STATE-ZIP	ORLANDO, FL 32804
TITLE	V.P. <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT B HEATH	2.2 NAME	
STREET ADDRESS	2730 N. O.B.T.	2.3 STREET ADDRESS	
CITY-STATE-ZIP	ORLANDO, FL 32804	2.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	200003077762--5
STREET ADDRESS		3.3 STREET ADDRESS	-12/22/99--01042--007
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	***150.00 ***150.00
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

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.

SIGNATURE: **Robert B Heath** **11-9-99** **407-423-8783**
Signature and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)

DO NOT REMOVE

11/09/99

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TO: Whom IT MAY CONCERN.

From: Robert B Heath
2730 N. OBT
Orlando, FL 32804
TRUCKS AND CARS FOR YOU.

In regard to filling our Annual report, it was sent to the 1850 Lee Rd Address. The individuals at this Address had moved to Longwood, one year before. The mail was never forwarded to our physical Address. I spoke to a Lady from DW of Corp and she said to write this letter and send a \$150 check Please call if anything else is needed.

Thank you
Robert B Heath