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Secretary of State
05-24-1999 90014 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine [illegible]
Secretary of [illegible]
DIVISION OF CORP[illegible]ONS

DOCUMENT # P97000001916

1. Corporation Name
SOUTHERN PRO TRUCK SERIES, INC.

Principal Place of Business	Mailing Address
8312 18TH AVENUE EAST PALMETTO FL 34221	8312 18TH AVENUE EAST PALMETTO FL 34221

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 22163 SW EDGEWATER 22 Suite, Apt. #, etc. 23 City & State DUNNELLON FLA 24 Zip 34431 25 Country USA	3a. Mailing Address 26 PO Box 964 27 Suite, Apt. #, etc. 28 City & State DUNNELLON FLA 29 Zip 34431 30 Country USA	3. Date Incorporated or Qualified 01/08/1997 4. FEI Number 65-0718461 ☐ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ $8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

AURIEMMA, GEORGE JR
8312 18TH AVENUE EAST
PALMETTO FL 34221

10. Name and Address of New Registered Agent

81 Name George Auriemma Jr.
82 Street Address (P.O. Box Number Only Not Acceptable) 22163 SW Edgewater
83 [illegible] DUNNELLON
84 City FL 85 Zip Code 34431

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] 7/16/99
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	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	AURIEMMA, GEORGE JR.		1.2 NAME		
STREET ADDRESS	8312 18TH AVENUE EAST		1.3 STREET ADDRESS	PO BOX 964	
CITY-ST-ZIP	PALMETTO FL 34221		1.4 CITY-ST-ZIP	DUNNELLON FLA. 34431	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-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, with all other like empowered.

SIGNATURE: [signature] 7/16/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)