2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Jan 25, 2005 8:00 am **Secretary of State** DOCUMENT # P97000060403 1. Entity Name 01-25-2005 90028 024 \*\*\*150.00 STEEL WHEELS, INC. Principal Place of Business Mailing Address 2605 ORANGE AVENUE 2605 ORANGE AVENUE FORT PIERCE FL 34947 FORT PIERCE FL 34947 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State Applied For City & State 4. FEI Number 65-0775509 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11 TITLE PD ☐ Delete THEF ☐ Change ☐ Addition FLORIO, FRANK NAME NAME 2605 ORANGE AVENUE STREET ADDRESS STREET ADDRESS FORT PIERCE FL 34947 CITY-ST-ZIP City-St-7iP SD TITLE ☐ Delete TITLE ☐ Change ☐ Addition FLORIO, KATHLEEN NAME STREET ADDRESS STREET ADDRESS 2605 ORANGE AVENUE FORT PIERCE FL 34947 CITY-ST-ZIP CITY-ST-ZIP TODD THOMAS FLORID BUNDY TITLE ☐ Addition ☐ Defete TITLE NAME NAME FLORID, TODD B STREET ADDRESS STREET ADDRESS 2605 ORANGE AVENUE CITY-ST-ZIP FORT PIERCE FL 34947 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE BUNDY, SCOTT NAME NAME STREET ADDRESS 2605 ORANGE AVE STREET ADDRESS FORT PIERCE FL 34947 CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Defete TITLE COLLEN, FLORID LAST NAME FLORIO NAME NAME 2605 ORANGE AVE STREET ADDRESS STREET ADDRESS FORT PIERCE FL 34947 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

1/19/05 772-460-9399