

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northcott
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

DOCUMENT # **S21497**

(0)

95 MAY 11 AM 10:35

1. Corporation Name

EASY WHEELS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**3314 NORTH CARL G. ROSE HIGHWAY
HERNANDO FL 34442**

**3314 NORTH CARL G. ROSE HIGHWAY
HERNANDO FL 34442**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1991

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

4. FCI Number

59-3050447

Applied For

Not Applicable

21. State Apt # etc

26. State Apt # etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22. City & State

27. City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24. FIC

25. COUNTY

28. FIC

30. COUNTY

8. This Corporation has liability for intangible tax under S. 199 (1)(2) Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WELTER, CHERYL J.
3314 NORTH CARL G. ROSE HWY
HERNANDO FL 32642**

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

Zip Code

11. Pursuant to the provisions of Sections 607 (9)(2) and 607 (15)(B), 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607 (15)(B), Florida Statutes.

SIGNATURE

(Print Name of Registered Agent)

(Print Registered Agent's name and address)

(Date)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: **D**
NAME: **WELTER, DENNIS J.**
STREET ADDRESS: **3314 N. CARL G. ROSE HWY**
CITY, ST, ZIP: **HERNANDO FL**

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP

Change Addition

1. TITLE: **D**
NAME: **WELTER, CHERYL A.**
STREET ADDRESS: **3314 N. CARL G. ROSE HWY**
CITY, ST, ZIP: **HERNANDO FL**

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY, ST, ZIP

Change Addition

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY, ST, ZIP

Change Addition

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

10. TITLE
11. NAME
12. STREET ADDRESS
13. CITY, ST, ZIP

Change Addition

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

14. TITLE
15. NAME
16. STREET ADDRESS
17. CITY, ST, ZIP

Change Addition

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

18. TITLE
19. NAME
20. STREET ADDRESS
21. CITY, ST, ZIP

Change Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119 (2)(c) 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 trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report. I do not have any other interest in this corporation.

SIGNATURE:

Dennis J. Welter DENNIS J. WELTER

5-9-95

904-344-8338

(Print Name and Typed or Printed Name of Signing Officer or Director)

(Date)

(Telephone Number)