## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V14354 1. Corporation Name SCHOOL BUS SALES, INC.

**FILED** May 02 1997 8:00am Secretary of State

Suite, Apt. #, etc.  City & State  Zip Country	28. Mailing Address 26 Suite, Apt. #. etc. 27 City & State 28		# V	4. FEl Number 65-0312209  5. Certificate of Status Desired	\$8.75	
Suite, Apt. #, etc.  City & State  Zip Country	Suite, Apt. #. etc. 27 City & State 28			5. Certificate of Status Desired	\$8.75	Additional
City & State  Zip Country	City & State	· • • • • • • • • • • • • • • • • • • •			\$8.75 Additions	
Zip Country			-	6. Election Campaign Financing		May Be
<b>-</b> ,	***	T - 87		Trust Fund Contribution	Added	to Fees
4 25	2 <sub>(p)</sub>	Country 30	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
9. Name and Address of Current Re			T	10. Name and Address of New Rec	istered Agent	
HERRING, KATHY		81	Name			
4101 N 33RD TERRACE HOLLYWOOD FL 33021		82	82 Street Address (P.O. Box Number is Not Acceptable)		e)	····
HOLLIWOOD FL 33021		83				
		84	City		FL  85   7ip	Code
office or registered agent, or both, in the State of F agent. I am familiar with, and accept the objection SIGNATURE  Signature, lead or panied range of register of agent and the Signature.  OF FICE RS AND DI	digital distribution of the state of the sta	Kath DIE Registered Ag	u Heri	vue 4/6	25/97	
TITLE D	DELETE	13.	1	ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME HERRING, LOUIS W.	<u></u>	1,2 NAME				
STREET ADDRESS 650 NW 27TH AVE.		1.3 \$TREE	T ADDRESS			
CITY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY -	S1-2IP			
TITLE	DELETE	2.1 TULE			L.] Change	L_J Addition
NAME STREET ADDRESS		2.2 NAME 2.3 STREE	T ADDRESS			
CITY-SI-ZIP		2.3 OHE				
TITLE	DELETE	3 1 THTLF			☐ Change	Addition
NAME		3.2 NAME				
STREET ADDRESS		. I	1 ADDRESS			
CITY-ST-ZIP	DELLTE	3.4 CITY - 4.1 TITLE	S1 · Z(P		Change	Addition
NAME		4. 2 NAME			المرات في	hand - work off
STREET ADDRESS			I ADDRESS			
CITY-ST-ZIP	···	4.4 CITY	ST-ZIP			
	☐ DELETE	5.1 TITLE	(		☐ Change	L_ Addition
TITLE	<del></del>					
TITLE NAME		5.2-NAMF	1 Africage			
TITLE Name Street address		5.9 STREE	T ADDRESS			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	DELFTE				Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE		5.3 STREE 5.4 CHY-			Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		5.3 STRCE 5.4 C(TY- 6.1 TITLE 6.2 NAME			Change	Addition