

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2005 8:00 am
Secretary of State

07-13-2005 90018 002 ***550.00

14018849



DOCUMENT # V67723 1. Entity Name ALTMAN WHOLESALE INCORPORATED					
Principal Place of Business 5975 COUNTY ROAD 352 KEYSTONE HEIGHTS, FL 32656			Mailing Address 5975 COUNTY ROAD 352 KEYSTONE HEIGHTS, FL 32656		
2. Principal Place of Business 5975 COUNTY ROAD 352 Suite, Apt. #, etc.		3. Mailing Address 5975 COUNTY ROAD 352 Suite, Apt. #, etc.			
City & State KEYSTONE HEIGHTS FL		City & State KEYSTONE HEIGHTS FL		4. FEI Number 59-3153329	
Zip 32656		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALTMAN, HUGH L 5975 COUNTY ROAD 352 KEYSTONE HEIGHTS, FL 32656				7. Name and Address of New Registered Agent Name SUSAN ALTMAN Street Address (P.O. Box Number is Not Acceptable) 5975 County Road 352 City Keystone Heights FL Zip Code 32656	
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: <u><i>Susan Altman</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>7/7/05</u>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTMAN, HUGH L 5975 COUNTY ROAD 352 KEYSTONE HEIGHTS, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 fees empowered.					
SIGNATURE: <u><i>Susan Altman as personal representative of the estate of HUG L. ALTMAN</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT
4018849

#V67723

IN THE CIRCUIT COURT, FOURTH
JUDICIAL CIRCUIT, IN AND FOR
CLAY COUNTY, FLORIDA

CASE NO: CP-04-338
DIVISION: A

IN RE: THE ESTATE OF

HUGH L. ALTMAN,

Deceased.

LETTERS OF ADMINISTRATION
(single personal representative)

TO ALL WHOM IT MAY CONCERN

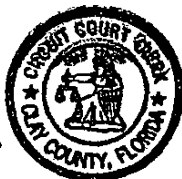
WHEREAS, HUGH L. ALTMAN, a resident of Jacksonville, Duval County, Florida,
died on September 11, 2004, owning assets in the State of Florida, and

WHEREAS, SUSAN ALTMAN has been appointed Personal Representative of the
Estate of the Decedent and has performed all acts prerequisite to issuance of Letters of
Administration in the Estate,

NOW, THEREFORE, I, the undersigned Circuit Judge, declare SUSAN ALTMAN
qualified under the laws of the State of Florida to act as Personal Representative of the
Estate of HUGH L. ALTMAN, deceased, with full power to administer the Estate according
to law; to ask, demand, sue for, recover and receive the property of the Decedent; to pay the
debts of the Decedent as far as the assets of the Estate will permit and the law directs; and to
make distribution of the Estate according to law.

ORDERED this 29 day of NOVEMBER, 2004.

JAMES B. JETT
CLERK OF THE CIRCUIT COURT
CLAY COUNTY, FLORIDA
A CERTIFIED COPY, and the
same is in full force and effect.



DATE: 10-29-04

BY: Douglas A. Oberdorfer D.C.

William J. Wilk
CIRCUIT JUDGE

DOUGLAS A. OBERDORFER, ESQUIRE 218 East Ashley Street, Jacksonville, FL 32202

FILED
JAMES B. JETT CLERK CLAY
2004 NOV 29 A 10:24

ATTACHMENT 14018849

To whom it May Concern, #V67723 July 2, 2005

My husband, Hugh Altman, has passed away Sept. 9, 2004 and has left me not knowing how to file anything correctly on the business we have. On top of that I, his wife, Susan Altman, have been trying to run the business which consists of 2 route trucks and a coverage of about 4 counties.

I have had a truck break down and so in the shop for repair for about 6 weeks. My father has since passed away, I work from 4am in the morning till sometime 8^{pm} & 9^{pm} at night. And then find out the truck isn't worth repairing & now have to find the time to look & purchase another truck. Please find it in your hearts to give me a hard ship leniency on these penalties as I have not a clue as to the truly manner nor how to fill out the government paperwork.

Please help me. Thank You
Susan Altman