

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L13846** (5)

1. Corporation Name

UNIVERSAL TEXACO SERVICE, INC.



Principal Place of Business

**8911 S ORANGE BLOSSOM TR
ORLANDO FL 32809**

Mailing Address

**3324 SOUTH ORANGE AVENUE
ORLANDO FL 32806
US**

2. Principal Place of Business

2a. Mailing Address

5533 S Orange Blossom Trail

3. Date Incorporated or Qualified
09/06/1989

3a. Date of Last Report
07/10/1995

4. FEI Number

59-2964503

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32839

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TADDEI, RUBENS

**3324 S ORANGE AVE
ORLANDO FL 32806**

81. Name

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

5533 S. Orange Blossom Trail

83.

84. City

FL

85. Zip Code
32839

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 typed or printed name of registered agent (if applicable)

Signature typed or printed name of new registered agent (if applicable)

DATE:

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PT

TADDEI, RUBENS

**3324 SOUTH ORANGE AVENUE
ORLANDO FL**

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

**5533 S. O.B.T.
ORL FL 32839**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D

TADDEI, RUBENS

**3324 SOUTH ORANGE AVENUE
ORLANDO FL**

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

**5533 So. Orange Blossom Tr.
ORLANDO, FL 32839**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S

BORRELL, EDGAR

**3324 S ORANGE AVENUE
ORLANDO FL**

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

**5533 So. Orange Blossom Tr.
ORLANDO, FL 32839**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

**MARCELO Taddei
5533 So. Orange Blossom Tr.
ORLANDO, FL 32839**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

**LARRY CHIRAPY
5533 So. Orange Blossom Tr.
ORLANDO, FL 32839**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Signature typed or printed name of officer or director

03/11/96

(407) 851-3796

CP2:034 (12/95)