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 # P95000054516 (6)

19TH STREET AUTO CENTER, INC.

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S

FILED Jan 22 1997 8:00am Secretary of State



1220 WEST 1	Principal Place of Business Mailing Address 1220 WEST 19 STREET 1220 WEST 19 STREET PANAMA CITY FL 32405 PANAMA CITY FL 32406-410								
				~10 1		3. Date Incorporated or Qualified 07/14/1995	3a. Date of 02/16/1		port :
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21	Mana	26	la Amb # ata			59-3325542			t Applicable
Suile, Apt.	. #, eic	27	le, Apt. #, etc.			5. Certificate of Status Desired		3./O A Fee Rea	dditional quired
	City & State City & State					6. Election Campaign Financing			May Be
23						Trust Fund Contribution		Added to	
7 ip	Country	Zıp		Count	У	8. This corporation has liability for i			199.032,
24	25	29		30			Yes No		
	9, Name and Address of C			8	Name	10. Name and Address of New Re	gistered Agen	<u> </u>	
	E LAW FIRM OF LAWRENCE	E J SPIEGEL CH	IRTD	_ ا	Ivame				
343 ALMERIA AVENUE			83	Street Add	dress (P.O. Box Number is Not Acceptab	le)			
CU	RAL GABLES FL 33134			8:	3				
				8	4 City		FL 85	Zip C	Code
SIGNATURE	Significantly produce punited name of registr	nco agent and little if app RS AND DIRECTOR		OTE: Registered A	gent signature req	ured when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIR	ECTOR	S IN 12
TifLE	PSTD		DELETE	1 1 TITLE				Change	Addition
NAME	LEGER, DANIEL EDMONI	D		1.2 NAME					
STREET ADDRESS	1220 WEST 19 STREET			13 STRE	T ADDRESS				
CITY - S1 - ZIP	PANAMA CITY FL 32405	/		1.4 CITY	ST-ZIP				
Title			DELETE	2.1 TITLE	}			Change	Addition
NAME				2.2 NAM					
STREET ADDRESS			•		ET ADDRESS				
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY 3.1 TITLE				Change	Addition
NAME				3.2 NAMI			٠ است		
STREET APORESS					ET ADDRESS				
CITY - ST - ZIP				3.4. CITY	-ST-ZIP				
TITLE			☐ DELETE	4.1 TITLE	.			Change	Addition
NAME.				4. 2 NAM	E [
STREET ADDRESS				1	FT ADDRESS				
Dity-St-ZiP			DELETE	4.4 CITY				Change	Addition
TITLE NAME			T DEFENCE	5.1 TITLE 5.2 NAMI				лапуч	L. Addition
STREET ADDRESS					ET ADDRESS				
CITY-S1-ZIP				5.4 C/TY					
TITLE			DELETE	61 TITLE				Change	Addition
NAME				6 2 NAMI					
STREET ADDRESS				6.3 STRE	ET ADDRESS				
CITY-\$1-ZIP				6.4 CITY	-ST-ZIP				

14. I do 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 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 open attack ment an address.

SIGNATURE: