COF ANNI	PROFIT RPORATION JAL REPORT 1998		Sandra B Secreta	ITMENT OF STATE . Mortham In of State CORPORATIONS	Apr 30	FILED 1998 8 tary of		
-	MENT # 2616 Name OCKA USED AUTO PAR		(9)			2		
Principal Plac	e of Business	Mailir	ng Address					
RT. 2. BOX 551 RT. 2. BOX 551 IMMOKALEE FL 33934 IMMOKALEE FL 33934								
••••					DO NOT W 3. Date Incorporated or Qualif	RITE IN THIS SPAC	E .	
			<u></u>		08/09/1962			
2. Principal P	9 2 mi Soft	75 28. M	ailing Address な名子	551	4. FEI Number 59-0976427			plied For t Applicab
Suite, Apt.		S	uite, Apl. #, etc.		5. Certificate of Status Desired		3.75 A	dditional
City & Stat	· KI FI	27 C	ty & State		6. Election Campaign Financia		Fee Re 5.00	quired May Be
23 Fm 71	phone Ma		mmokols		Trust Fund Contribution		Added k	o Fees
×1 341	42 25 V	5 29	34142	30 V 5	 This corporation owes or hat Personal Property Tax due 			ingible No
	9. Name and Address of C	urrent Register	ed Agent	81 Name	10, Name and Address of New		t	
	iunzio, philip R. 5-31st street, s.w.				dress (P.O. Box Number is Not Acce	entable)		
	PLES FL 33934				IGTORS (F.O. DOX INCHIDELIS INCLACCE	mana)		
				[[
				83				
11. Pursuant office or r	to the provisions of Sections 60 egistered agent, or both, in the	7.0502 and 607. State of Florida.	1508, Florida Statute Such change was a	84 City	provation submits this statement for ration's board of directors. I hereby a	FL 85 the purpose of chan iccept the appointm		
11. Pursuant office or r agent. I a SIGNATURE 12.	Signature, typed or printed name of register		oplicable (NOTE	84 City	prporation submits this statement for ration's board of directors. I hereby a gured when reinstating) ADDITIONS/CHANGES TO C	the purpose of chan iccept the appointm	iging its ent as r	s registere registered
SIGNATURE 12. TITLE	Signature, typed or printed name of register OFFICER	red agont and tille if ap	oplicable (NOTE	B4 City Gity Sature above-named cc uthorized by the corpor rida Statutes. Registered Agent signature rec 13, 1.1 TITLE	guired when reinstating)	DATE	iging its ent as r	s registere registered
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of regretor OFFICER PD DINUNZIO, PHILIP R.	red agont and tille if ap	oplicable (NOTE	84 City es, the above-named cc uthorized by the corpor rida Statutes.	guired when reinstating)	DATE	iging its ient as r	s registere registered
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