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

PROFIT CORPORATION ANNUAL REPORT 1000

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| | JAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS | | | Secretary of State | | |
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| MINI-CA | ARS INCORPORATED | | | | | |
| | | | | | 120110 1111 12011 1111 1111 1111 1111 1111 1111 1111 1111 1111 1111 1111 1111 | I I I I I I I I I I I I I I I I I I I |
| Principal Plac | e of Rusiness | Mailing Address | | | | |
| Principal Place of Business Mailing Address | | | | | | |
| 9741 CASEY DR. 9741 CASEY DR. NEW PORT RICHEY FL 34 | | | EY FL 34654-05 | 07 | | |
| _ | | | | - | DO NOT WRITE IN TH | IIS SPACE |
| | | | | | 3. Date Incorporated or Qualified | |
| 2. Principal Place of Business 2a. Mailing Address | | | SS | | 04/13/1966 4. FEI Number | Applied For |
| 21 | | 26 | | | 59-1116833 | Not Applicable |
| Suite, Apt | #, etc. | | Suite, Apt. #, etc. | | | \$8.75 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee Required |
| City & State | 9 | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 Zip | Country | 28 | 1 0 | ountry | Trust Fund Contribution | Added to Fees |
| 24 | 25 | 29 | 30 | out it, y | This corporation owes or has paid the Personal Property Tax due June 30. | Current year Intangible |
| | 9. Name and Address of Curr | | 1401 | | 10, Name and Address of New Registers | |
| RO | DGERS, G.J. | | | 81 Name | | |
| 9741 CASÉY DR | | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| NEW PORT RICHEY FL 34654 | | | | | , | |
| | | | | 83 | | |
| | | | | 84 City | | 85 Zip Code |
| 11 Pursuant | to the provisions of Sections 607.0 | 502 and 607 1508. Florids | Statutes the | above named co | rporation submits this statement for the purpose | |
| office or re | egistered agent, or both, in the Sta | ite of Florida. Such chang | e was authoriz | ed by the corpora | ation's board of directors. I hereby accept the a | appointment as registered |
| SIGNATURE | minar with, and accept the ob- | igations of, Section 607.0: | oos, rionda si | aidles. | | |
| SIGNATURE | Signature, typed or printed name of registered is | agent and title it applicable | (NOTE Register | red Agent signature requ | uked when reinstating) DATI | |
| 12. | | ND DIRECTORS | 13 | | ADDITIONS/CHANGES TO OFFICERS A | |
| TITLE | vpd Oehler,j m | ☐ DELI | | TITLE | | Change Addition |
| NAME STREET ADDRESS | 7931 BRACKEN DR. | | | NAME | | |
| CITY-ST-ZIP | PORT RICHEY FL | | | STREET ADDRESS City-St-Zip | | |
| TITLE | PTS | DEL | | TITLE | | Change Addition |
| NAME | RODGERS,G J | | | NAME | | |
| STREET ADDRESS | 9741 CASÉY DR. | | 2.3 | STREET ADDRESS | | |
| CITY-ST-ZIP | N. PORT RICHEY FL | | | CITY-ST-ZIP | | |
| TITLE | | ☐ DELE | TE 3.1 | TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.21 | NAME | | |
| STREET ADDRESS | | | | STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELE | | CITY-ST-ZIP TITLE | | ☐ Change ☐ Addition |
| NAME | | F1 0000 | 1 | NAME | | □ coorde □ von(top |
| STREET ADDRESS | | | | STREET ADDRESS | | |
| City-St-ZIP | | | | CITY-ST-ZIP | | |
| TITLE | | ☐ DELE | | TOTLE | | ☐ Change ☐ Addition |
| NAME | | | 5.21 | NAME | ` | |
| STREET ADDRESS | | | 5.3 3 | STREET ADDRESS | | |
| CITY-ST-ZIP | | | | CITY-ST-ZIP | | |
| TITLE | | ☐ DELE | | TITLE | | Change Addition |
| | | | | | | |

14. 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 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.

6.3 STREET ADDRESS

STREET ADDRESS

FILED

Apr 28 1998 8:00am