

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. McInnis
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **335566** (6)
BOBO'S TIRE SERVICE, INC.



4504 W. 17-92 HAINES CITY FL 33844
4504 W. 17-92 HAINES CITY FL 33844

21. Principal Office of the Corporation
22. Principal Office of the Corporation
23. Principal Office of the Corporation
24. Principal Office of the Corporation

2a. Mailing Address
26. Street Address
27. City & State
28. Zip
29. County

9. Name and Address of Current Registered Agent

BOBO, AVA, NELL
1024 SURRY ST
HAINES CITY FL 33844

3. Date Incorporated or Qualified: **09/26/1968**
3a. Date of Last Report: **01/24/1995**
4. FEIN Number: **59-1263974**
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
10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. I, the undersigned, being a resident of this State, do hereby certify that the above named corporation is a corporation organized under the laws of 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 not a shareholder, officer, director, or agent of the corporation under Florida Statutes.

12. OFFICERS AND DIRECTORS

PD BOBO, AVA, NELL 1024 SURRY ST HAINES CITY FL V
BOBO, DAVID 1021 SURRY ST. HAINES CITY FL V
BOBO, KENNETH 1024 SURRY ST HAINES CITY FL ST
BOBO, CONCHITA 1118 SURRY ST. HAINES CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. NAME Change Addition
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100. NAME

14. I, the undersigned, being a resident of this State, do hereby certify that the information supplied is true and correct, and that the undersigned is qualified to be the registered agent for the corporation as stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information contained in this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am not a shareholder, officer, director, or agent of the corporation. I hereby agree to the changes of name and address as provided by Chapter 607, Florida Statutes, and that my name is not on the list of shareholders, officers, directors, or agents of the corporation.

SIGNATURE: *Ava Nell Bobo* 6-1-20-96 (422-2215)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)