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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

389055

(5)

AUTOLAND, INC.

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

FILED Jan 16 1998 8:00am Secretary of State

Principal Plac	Mailing Address	dress					
0005 0 5 55	DECAL LUCEBUAY	9605 S.E. FEDERAL HIGHWAY					
9605 S.E. FEDERAL HIGHWAY 9605 S.E. FEDERA HOBE SOUND FL 33455 HOBE SOUND FL							
11002 00011	3 1 2 00100	11002 000110 12 00400				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		_		4. FEI Number Applied For	
21		26				59-1363625 Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.				\$8.75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip	Cot	untry		8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. 🕡 Yes 🔲 No	
	9. Name and Address of Current	Registered Agent		\Box		10. Name and Address of New Registered Agent	
CO	NEY, CHARLES H., JR.			81	Name		
8440 DHARLYS ST							
	BE SOUND FL 33455			82	Street Address (P.O. Box Number is Not Acceptable)		
nu	DE SOUND FL 33433			83			
				84	City	FL 85 Zip Code	
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 				bove d by tutes	-named the corp	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered	
SIGNATURE		•					
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. [NOT	E: Registere	d Age	nt signature i	required when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVD	DELETE	1,1 T	ITLE		Change Addition	
NAME	CONEY, CHARLES H, JR		1.2 N	AME	- 1		
STREET ADDRESS	8440 DHARLYS ST		1.3 STREET		ADDRESS		
City-St-ZiP	HOBE SOUND, FL 00000		1.4 CITY~5		r-ZIP		
TITLE	SD	☐ DELETE	2.1 TI			Change Addition	
NAME	CONEY, DOROTHY		2.2 NAME				
STREET ADDRESS	8440 DHARLYS ST		2.3 STREE		ADDRESS		
CITY-ST-ZIP	HOBE SOUND, FL 00000		2, 4 CITY-		- 1		
TITLE	11000 000110; 12 00000	DELETE	3.1 T		1 211	Change Addition	
NAME		_	3.2 NAME		1		
					1000000		
STREET ADDRESS			3.3 STREE				
CITY-ST-ZIP		DELETE	3.4. CITY-		1-212	Change Addition	
TITLE		T DETELE				. Li Gialige Li Addition 1	
NAME			4, 2 NAME				
STREET ADDRESS			4,3 STREET ADDI				
CITY-ST-ZIP			4.4 C	ITY - \$1	-ZIP		

6.4 CITY - ST - ZIP 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.

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

DELETE

DELETE

Addition

Addition

Change