FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **392560** **(9)**

1. Corporation Name
PRECISION TOYOTA, INC.

Principal Place of Business
10909 N FLORIDA AVE
TAMPA FL 33614
US

Mailing Address
463 N. DALE MABRY
TAMPA FL 33614
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/08/1971
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 10909 N. FLORIDA AVE
22 Suite Apt. #, etc.
23 City & State: TAMPA, FL
24 Zip: 33612
25 County: US

2a. Mailing Address
26 4636 N DALE MABRY
27 Suite Apt. #, etc.
28 City & State: TAMPA FL
29 Zip: 33614
30 County: US

4. FEI Number: 59-1368036 — Applied For ☐ Not Applicable ☐

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 assets for intangible tax under § 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
SCOTSON, RONALD B
4636 N. DALE MABRY
TAMPA FL 33614

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. Pursuant to the provisions of Section 607.0501 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida for business as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0501 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TYPE	D
NAME	MORSANI, CAROL D
STREET ADDRESS	4636 N. DALE MABRY
CITY, ST, ZIP	TAMPA, FL 0
TYPE	CD
NAME	MORSANI, FRANK L
STREET ADDRESS	4636 N. DALE MABRY
CITY, ST, ZIP	TAMPA, FL 0
TYPE	ST
NAME	SCOTSON, RONALD B
STREET ADDRESS	4636 N. DALE MABRY
CITY, ST, ZIP	TAMPA FL
TYPE	DP
NAME	ROMANO, JACK
STREET ADDRESS	4636 N. DALE MABRY
CITY, ST, ZIP	TAMPA FL
TYPE	AS
NAME	HIGBEE, ALAN
STREET ADDRESS	501 E KENNEDY BLVD #1700
CITY, ST, ZIP	TAMPA FL
TYPE	V
NAME	TARTARO, LEONARD
STREET ADDRESS	10909 N FLORIDA AVE
CITY, ST, ZIP	TAMPA FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TYPE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TYPE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TYPE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
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NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TYPE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is accurately formatted and does not exceed the limitations stated in Section 119.07(1)(b) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and is correct 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 the report as required by Chapter 607 Florida Statutes, and that my name appears in Block 12 or Block 13 (if changed or added) or is attached with an address.

SIGNATURE: Ronald B Scotson 5/1/95 (813) 873-0003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RONALD B SCOTSON

0293368 CP