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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90025 042 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 179167

1. Corporation	AUTOMOTIVE SERVICE CEN	TER, INC.				
Principal Plac	ce of Business	Mailing Address		# !BB!!! B!B!! 10801 10861 14818 8!!!! 18	/	: 610 11 610 11 1 03 1
1912 N TAMPA ST 1912 N TAMPA ST TAMPA FL 33602 TAMPA FL 33602						
,				3. Date Incorporated or Qualifed 06/18/1975	THIS SPACE	- ::
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 59-1609836		pplied For
	Suite, Apt. #, etc.				\$8.75	ot Applicable Additional
22		27		5. Certifcate of Status Desired		equired
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	• • • • • • • • • • • • • • • • • • • •	
24	25	29	30	Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent	
SAF	OS, CHRIS JR.		or Name			
191	1912 N TAMPA ST			dress (P.O. Box Number is Not Acceptable)		
TAMPA FL 33602-9133			83	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	Mail 4444 1251
				11. 14. 14. 14. 14. 14. 14. 14. 14. 14.		
		٠.	84 City	The state of the s	FL 85 Zip	Code
11. Pursuant office or i agent. I a		and 607.1508, Florida Statute Florida. Such change was au ins of, Section 607.0505, Flor	es, the above-named co athorized by the corpora ida Statutes.	rporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its appointment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature requi	ired when reinstating)	ATE	÷
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	PD CAFOC CURIO	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME STREET ADDRESS	SAFOS, CHRIS 1912 NORTH TAMPA STREET		1.2 NAME			•
CITY-ST-ZIP	TAMPA, FL 00000		1.3 STREET ADDRESS		•	,
TITLE	TAME A, TE 00000	☐ DELETE	1.4 CITY-ST-ZIP		: Change	Addition
NAME	·		2.2 NAME			 ,
STREET ADDRESS			2.3 STREET ADDRESS			·
CITY-ST-ZIP			2.4 CITY-ST-ZIP			•
TITLE (Line)	The magnetical set	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME		1.	3.2 NAME	· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS	PARTITION TO THE TANK THE TRANSPORT OF THE TANK THE TANK THE TRANSPORT OF THE TANK T		3.3 STREET ADDRESS		(ME) 10 10 10 10 10 10 10 10 10 10 10 10 10	1.1. 1.2. 11.11
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP			Mild of 150.
	· .	C. DECETE			Change	S. [3] Addition
NAME STREET ADDRESS		Marine Marine	4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP		•	4.4 CITY-ST-ZIP			
TITLE	* '	☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME.	1 st of 1		5.2 NAME	1. 100 1.		
STREET ADDRESS	•		5.3 STREET ADDRESS			
CITY-ST-ZIP		·	5.4 CITY-ST-ZIP	garantana Marintana		
TITLE	an County Fuel 1 is	☐ DELETE	6.1 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 of on any attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

物理工作等 (4) 人。