05-05-1999 90025 044 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 570574 1. Corporation Name

STREET ADDRESS

COURTESY AUTO SALES, INC.

							LABAR BERBER BABAR BERBER B	HOR BIER IEO
Principal Place of Business Mailing Address								
2800 US 1 2800 US 1								
VERO BEACH FL 32960		VERO BEACH FL 32960				DO NOT WRITE IN	THIS SDACE	
US US						3. Date Incorporated or Qualified	THIS ST ACE	
						04/27/1978		
2. Principal Place of Business 2a. Mai			Mailing Address			4. FEI Number	Api	plied For
21		26				59-1817541	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	1
22		27	27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
		28				Trust Fund Contribution	Added to	o Fees
Zip	ip Country Zip		Col	Country		8. This corporation owes the current ye		_ 1
24	25 29 30)		Personal Property Tax.	☐ Yes	□No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registe	red Agent	
				81	Name			
HOPKINS, JOHN				82	Ctroot A	ddress (P.O. Box Number is Not Acceptable)		
1311 SW 20TH AVE				**	Succi A	October 15 (1.0. Box Hulling 15 (10.7) 669(DO.		1
VER	O BEACH FL 32962			83	/			
				84	City		FL 85 Zip C	Code
11 Ducquant	to the provisions of Sections 607 050	2 and 607 1508. Florida	Statutes, the a	bove	-named c	orporation submits this statement for the purpo	se of changing its	registered
office or re	edistered agent or both in the State.	of Florida, Such change	was authorized	a by	тле согрог	ration's board of directors. I hereby accept the	ppointment as re	gistered
agent. I ai	m familiar with, and accept the obliga	itions of, Section 607.05	U5, Florida Stat	utes	•			i
SIGNATURE			ALOTE: Projetore	1 Appr	t rianature ra	quired when reinstating) DA	<u> </u>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE- 12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	VP DELETE			1.1 TITLE			☐ Change	Addition
	4.			1.2 NAME			_	
NAME	Comerci, Torret			1.3 STREET ADDRESS				
STREET ADDRESS	VEDO BEACH EL ACOCO							
CITY-ST-ZIP	72.10 02.101, 12.0200			1.4 CITY-ST-ZIP			☐ Change	Addition
TITLE	VI		2.1 TITLE					
NAME	MOEERACK, TOTAL		AME					
STREET ADDRESS			2.3 S	2.3 STREET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL 32960			2. 4 CITY-ST-ZIP				Part & delikio -
TITLE	<u> </u>				ĺ		Change	Addition
NAME	HOPKINS, JOHN		AME	Į			ļ	
STREET ADDRESS	1311 SW 20TH AVE 333		TREE	ADDRESS				
CITY-ST-ZIP	\=\(\tau\)		OITY-S	T-ZIP				
TITLE		☐ DELETE 4.11		ITLE			Change	☐ Addition
NAME		<i>:</i> 4.2°		KAMÉ				
STREET ADDRESS	4.38		TREE	ADDRESS				
CiTY-ST-ZIP			4.4 C	ITY-S	T-ZIP			
TITLE	ŧ 1						☐ Change	Addition
NAME	•		AME					
STREET ADDRESS			5.3 S	TREE	ADDRESS			
					1			
	*		540	ITY-S	T-ZIP			J
CITY-ST-ZIP TITLE		☐ DEL			T-ZIP		☐ Change	Addition

CITY-ST-ZIP 14. 1 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

John Hopkins 4/25/99 561-770-3665