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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 607322 1. Corporation Name

TOP VALUE CARS, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

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Zip

Principal Place of Business Mailing Address 3510 OLD WINTER GARDEN ROAD 3510 OLD WINTER GARDEN ROAD ORLANDO FL 32805 ORLANDO FL 32805

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90164 007 ***150.00

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DO NOT WRITE IN THIS	S SPACE	
3. Date Incorporated or Qualifed		
01/22/1979		
I. FEI Number	Applied For	
59-1876737	Not Applicable	
6. Certifcate of Status Desired	\$8.75 Additional Fee Required	
S. Election Campaign Financing	\$5.00 May Be	
Trust-Fund-Contribution	Added to Fees	

KIRK, JEFFREY K. 3510 OLD WINTER GARDEN ROAD ORLANDO FL 32805

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Country

9. Name and Address of Current Registered Agent

	Personal Property Tax.	{J Yes ⊈No
	10. Name and Address of New Regis	stered Agent
81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	El 85 Zip Code

8. This corporation owes the current year Intangible

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Such change was 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 607.0505, Florida Statutes.

Country

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SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DPST DELETE	1.1 TITLE	Change Addition			
NAME	KIRK, JEFFREY K.	1.2 NAME	_ onange			
STREET ADDRESS	3510 OLD WINTER GARDEN RD.	1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP				
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition			
NAME		2.2 NAME				
STREET ADDRESS		2.3 STREET ADDRESS				
CITY-ST-ZIP		2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition			
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
"CITY-ST-ZIP	-	3.4. CITY-ST-ZIP				
mle	☐ DELETE	4.1 TITLE	Ghange - Addition			
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE	· Change Addition			
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY-ST-ZIP	ļ			
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition			
NAME		6.2 NAME	· - 1			
STREET ADDRESS		6.3 STREET ADDRESS	į			

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, with all other like empowered.

SIGNATURE:



407-299-85-00