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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 666303

(3)

SABAL CHASE SERVICE & TIRE CENTER, INC Principal Place of Business Mailing Address 12019 S.W. 117 COURT MIAMI FL 33186 MIAMI FL 33186-5202				· ·	· · · · · · · · · · · · · · · · · · ·				
						3. Date Incorporated or Qualified 04/09/1980		ate of Last Re /22/1996	aport
 , '	Place of Business	2a. Mailing Address	⊢ 1 *			4. FEI Number 59-2007174		h	plied For at Applicable
Surte, Ap	I. #, elc.	Suite, Apt. #, etc.	······································			5. Certificate of Status Desired		\$8.75 A	Additional
City & Sta	alo	City & State	· · · · · · · · · · · · · · · · · · ·			6. Election Campaign Financing		\$5.00	·
3		28	COUNTY			Trust Fund Contribution Added to Fees			
<i>Z</i> ip ⊻4	Country 25	Ζιρ 29	30	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curre					10. Name and Address of New Re	gistered	Agent	
MAYERS, RANDALL S. 12019 S.W. 117 COURT					ame reet Addr	ess (P.O. Box Number is Not Acceptal	ble)		<u></u>
MIAMI FL 33186				33					
			}-	34 Ci	tv			85 Zip (Code
					<u>-</u>	oration submits this statement for the join's board of directors. I hereby acce	<u>FL</u>		
SIGNATURE	Signature, lyped or printed name of registered a	ND DIRECTORS	13.		nature requir	ed when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE CERS ANI		
TITLE	MAYERS, RANDALL S.	DELETE	1.1 TITL		-			Change	Addition
namé Street adoress	AGENE OUL BODD AVE		1.2 NAM 1.3 STR	eet addf	RESS				
CITY-S1-ZIP	MIAMI FL			(-ST-ZIF	1				
TITLE	V	V DELETE		E				Change Ad	Addition
NAME	MAYERS, DENNIS		2.2 NAA	4E					
STREET ADDRESS	10261 S.W. 98TH AVENUE ,OA,O. F;			EET ADDI	1				
CHTY - ST - ZIP TUTLE	\$T			2 4 CHY-ST-ZIP 3 1 TITLE				Change	Addition
NAME	BARALT, CARLOS L.		3.2 NAN	AE.					
STREET ADDRESS			3 3 STR	eet adoi	RESS				
CITY ST-ZIP	MIAMI FL	T Drieve		Y-ST-ZI		······································	·····	Change	I de al
DILE		☐ DELETÉ	4.1 TiTi					Change	Addition
NAME STREET ADORESS	c		4, 2 NAI	vil Eet addi	*FSS				
STREET ADORES: CITY-ST-ZIP	S (CE 1 XDD1 (• ST • ZIF	1				
THLE		☐ DELETE	5.1 TITL			·*····································		Change	Addition
NAME			5.2 NAM	AE .					
STREET ADDRESS	s		5.3 STR	EET ADDI	ress				
CITY - ST - ZIP			5.4 CITY	/-ST-ZIF	·				
TITLE		DELETE	6.1 TITL		'			Change	Addition
NAM(6.2 NAA	AE					
STREET ADDRESS	s		6.3 STR	EET ADO	RESS				

14. I do 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 shanged, or an amultachment with an address.

SIGNATURE:

FILED

May 08 1997 8:00am

Secretary of State