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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 677415

(2)

LIBERTY AUTO SALES AND LEASING, INC.

Principal Place of Business Mailing Address

3301 REID ST 3301 REID ST
PALATKA FL 32177 PALATKA FL 32177

FILED Mar 30 1998 8:00am Secretary of State



PADAIRA PE 32177				LMINN PL JEIFF				DO NOT WRITE IN THIS SPACE					
								<ol><li>Date Incorporated or Qualifie</li></ol>	d				
								06/30/1980					
2. Principal Place of Business				Mailing Address	•			4, FEI Number			Applied Fo		
21			26					59-2011492			Not Applica		
Suite, Apt.	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired					
City & State	)			City & State				Election Campaign Financing		\$5.	00 May Be		
23			28					Trust Fund Contribution			•		
Zip		Country		Zip	Co	untry		8. This corporation owes or has	paid the c	urrent yea	r Intangible		
24		25	29		30			Personal Property Tax due Ju	ine 30.	Yes	□ No		
	g, Name a	and Address of Curren	t Registe	ered Agent		<u> </u>		10. Name and Address of New	Registere	d Agent			
ALF	IERO, TON	γ				81	Name		S. Certificate of Status Desired Steel Contribution States Corporation owes or has paid the current year Intangible				
330	1 REID ST					82	Street Ac	dress (P.O. Box Number is Not Accept	table)				
PAL	Country 25 9. Name and Address of Current Re IERO, TONY 1 REID ST ATKA FL 32177						QII DOCTIO	saloss (i .e. sax italiasi is itak itasap	10010)				
						63							
						84	City		G	85	Zip Code		
44 Purement	to the province	ons of Sections 607 DEA	2 and so	7 1508 Florida Statut	as than	abovic	-named or	orporation submits this statement for th			na ite ranieta		
office or re	ogistered age	int, or both, in the State	of Florida	a Such change was	authorize	ed by	the corpo	orporation sporting this statement for in tration's board of directors. I hereby ac-	cept the at	ppointmen	t as registere		
_	n ramilar will	i, and accept the obliga	uions ot,	Section 607.0505, FR	onua 5ta	ı(U(C\$							
GIGNATURE	Signature, typod o	r printed name of registered agei	nt and tilln if	annicable (NO)	E Registeri	ed Ane		quired when reinstating)	DATE				
12.		OFFICERS AND	DIRECT	TORS	13.		ni signature re-	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECT	TORS IN 12		
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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 is explainmental 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.

SIGNATURE: X

Jon astu

3-25-98

904-328.0667