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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 814685

ROYAL AUTOMOTIVE GROUP, INC.

						ı
Principal Place of Business Mailing Address						ji .
2700 HIGHWAY 280 EAST		2700 HIGHWAY 280 EAST				
STE 300		STE 300			DO NOT WRITE IN THIS SPACE	
		US	BIRMINGHAM AL 35223		3. Date Incorporated or Qualifed	
		•			08/26/1960	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			63-6009882 Not Applicabl	le
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22 27					ree Required	_
City & State		City & State	<u> </u>		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		 	Zip Country		8. This corporation owes the current year Intangible	-
24	25 29 30				Personal Property Tax.	
1.4-71	9. Name and Address of Curren				10. Name and Address of New Registered Agent	
			81	Name)	
CT CORPORATION SYSTEM			82	Street A	t Address (P.O. Box Number is Not Acceptable)	\dashv
1200 S. PINE ISLAND ROAD						
PLAT	NTATION FL 33324		83			
			84	City	FL 85 Zip Code	╗
44 - Dominion	4.5. 4.5. 607.050	22 and 607 1509. Elorida Statuto	s the above	named (d corporation submits this statement for the purpose of changing its registered	\dashv
office or n	egistered agent, or both, in the State	of Florida. Such change was au	ithorized by	the corpo	poration's board of directors. I hereby accept the appointment as registered	}
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statutes	•		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE:	Registered Age	nt signature re	a required when reinstating) DATE .	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	1	☐ Change ☐ Addition	on
NAME	BELCHER, DAVID		1.2 NAME	1		
STREET ADDRESS	3010 COLUMBIANA ROAD		1.3 STREE	TADDRESS	5	
C/TY-ST-ZIP	VESTAIIA AL		1.4 CITY-S	T-ZIP		
TITLE	\$	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	.on
NAME.	ANDERS, LOUIS, H. JR.		2.2 NAME		1	
STREET ADDRESS	2906 WESTMORELAND DR			FADDRESS	3	
CITY-ST-ZIP	BIRMINGHAM AL	□ DELETE	2. 4 CITY-5 3.1 TITLE	ST-ZIP	[Change	ion
TITLE NAME			3.1 NAME	İ		
]						
STREET ADDRESS CITY-ST-ZIP	i		1	TADORESS		
			3.3 STREE	T ADDRESS	5	
		☐ DELETE	1		s Change Additi	on
TITLE		☐ DELETE	3.3 STREE 3.4. CITY-5			ion
TITLE NAME		☐ DELETE	3.3 STREE 3.4. CITY-5 4.1 TITLE 4.2 NAME		☐ Change ☐ Addition	ion
TITLE	,	□ DELETE	3.3 STREE 3.4. CITY-5 4.1 TITLE 4.2 NAME	TADDRESS	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS	,	☐ DELETE	3.3 STREE 3.4. CITY-5 4.1 TITLE 4.2 NAME 4.3 STREE	TADDRESS	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		3.3 STREE 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	TADDRESS	☐ Change ☐ Addition	
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP