

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F73979** (9)
1. Corporation Name
MILLS TIRE AND AUTO CENTER, INC.



Principal Place of Business 331 N.E. 26TH STREET POMPANO BCH. FL 33064	Mailing Address POST OFFICE BOX 1505 POMPANO BEACH FL 33061 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5319 N.E. 54 PLACE Suite, Apt. #, etc. 22 City & State 23 HIGH SPRINGS, FLORIDA Zip 24 32643 Country 25 GILCHRIST		2a. Mailing Address 26 5319 NE 54 PLACE Suite, Apt. #, etc. 27 City & State 28 HIGH SPRINGS, FLORIDA Zip 29 32643 Country 30 GILCHRIST		3. Date Incorporated or Qualified 03/29/1982	
4. FEI Number 59-2365151		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLS, RONALD L.
331 N.E. 26TH STREET
POMPANO BEACH FL 33064**

81 Name	82 Street Address (P.O. Box Number is Not Acceptable) 5319 N.E. 54 PLACE
83	
84 City HIGH SPRINGS	85 Zip Code FL 32643

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.

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	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P MILLS, RONALD L.	1.2 NAME	
STREET ADDRESS	331 N.E. 26TH STREET POMPANO BEACH FL	1.3 STREET ADDRESS	5319 NE 54 PLACE HIGH SPRINGS, FLORIDA 32643
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ST MILLS, GEORGIA S.	2.2 NAME	
STREET ADDRESS	331 N.E. 26TH STREET POMPANO BEACH FL	2.3 STREET ADDRESS	5319 NE 54 PLACE HIGH SPRINGS, FLORIDA 32643
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, in an attachment with an address.

SIGNATURE:  **RONALD L. MILLS** 4/6/98 (904) 454-5616

CR2E034 (10/97)