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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H32206

(5)

ABC AUTOMOTIVE ENTERPRISES, INC.

FILED
Jan 20 1998 8:00am
Secretary of State



5.1.1.1.0		Malling Address					
Principal Place		Mailing Address					
3119 CLARK I - <del>P.O. BOX 5</del> 95		3119 CLARK RD. P.O. BOX 5950					
SARASOTA FI		SARASOTA FL 34231			DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified		
					12/03/1984	T 14 6.45.	
<b>─</b> ~	lace of Businoss  1 Clark Rd	2a. Mailing Address	يا سم ۵	e Rd	4. FEI Number	Applied For Not Applica	
21 3110 Sulte, Apt.	<del>'</del>	26 3119 CU Suite, Apt. #, etc.	<del></del>	- 1-3-	59-2459246	\$8.75 Additional	
22 Suite, Apr.	π, <del>σι</del> ο.	27			5. Certificate of Status Desired	Fee Regulred	<b>'</b>
City & State	9	City & State	<del></del>		6. Election Campaign Financing	\$5.00 May Be	
23 500	-asota FI	28 Saraso1	م	<del> -</del>	Trust Fund Contribution	Added to Fees	
ZiD .	Country	Zip	Count		8. This corporation owes or has paid the o		
24 34	20 0		10	ےر	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Registere	a Agent	
	SON, JOSEPH W.		8	Name			
	9 CLARK ROAD		8	2 Street Addre	ess (P.O. Box Number is Not Acceptable)		
SAI	rasota fl 34231		8	3			
			8	4 City	F	85 Zip Code	
11 Director	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the abo	ve-named corn	poration submits this statement for the purpose	of changing its register	red
office or r	egistered agent, or both, in the State	of Florida. Such change was au	thorized (	by the corporati	ion's board of directors. I hereby accept the a	pointment as registere	d
agent. La	m tamiliar with, and accept the obliga-	lions of, Section 607,0505, Fior	ida Statut	es.			
SIGNATURE	Signature, typed or printed name of registered agent	I and the if applicable (NOTE:	Registered A	gent signature require	ed when reinstating) DATE		}
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	DV	☐ DELFTE	1.1 THILE			Change Addi	ilion
NAME	Mason, Joseph W.		1.2 NAM	F			
STREET ADDRESS	3119 CLARK RD.		1.3 STRE	E1 ADDRESS			ļ
CITY-ST-ZIP	SARASOTA FL		1.4 CITY				
TITLE	PD	DELETE	2 1 TITLE	1		Change Addi	ilion :
NAME	MASON, SANDRA A.		2.2 NAM	E			
SYREET ADDRESS	3119 CLARK RD.		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	SARASOTA FL	DELETE		'-ST-ZIP		Change Addi	ition
TITLE		L'I DETEIR	3.1 TITLE	1		C change C Addi	IIIOII
NAME			3.2 NAM				
STREET ADDRESS			1	[T ADDRESS			
CITY-ST-ZIP		DELETE	3.4. City 4.1 Title	'-ST-7IP		Change Addi	ilion
TITLE .		presit	4. 2 NAM	1			
STREET ADDRESS				ET ADDRESS			
			4.4 CITY				ļ
CITY-ST-ZIP TITLE		DELETE	5.1 TITE			Change Addi	ition
NAME			5.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-SI-ZIP			
TiTLE		DELETE	6.1 TITLE			Change Addi	tion
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14 I hereby o	pertify that the information supplied wit	b this filing does not qualify for			Section 119.07(3)(i), Florida Statutes, I further	certify that the informati	ion

14. I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0 (3)(i), Florida Statutes. 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.

CICNATURE:

- 4-98 guli-9

941-924-9189