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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H92999

(2)

VINCE WHIBBS IMPORTS, INC.

FILED
Mar 11 1997 8:00am
Secretary of State

Principal Place of Business         Mailing Address           3201 NAVY BLVD.         3201 NAVY BLVD.           PO DRAWER 12566         PO DRAWER 12568           PENSACOLA FL 32573-9566         PENSACOLA FL 32573-2586				- I TOOLOTY OUR TRUID LIGUE VEHIC TENEN TOUT OLDIN DUOTE BY BY BY BY BY IN THE					
PENSACOU	M FL 323/3-3000	PENSAGOLA PL 32373-230	<b>10</b>			3. Date Incorporated or Qualified 01/03/1986	3a, Date 04/17	of Last //1996	Report
2, Ралора 11	al Place of Business	2a, Mailing Address 26				4. FEI Number 59-2615302			pplied For lot Applicabl
Suite, A	apt #, etc	Suite, Apt. #, etc		******		5. Certificate of Status Desired		\$8.75	Additional Required
2     City & S  3	State	City & State	·			Election Campaign Financing     Trust Fund Contribution		\$5.00	May Be
Ζ <sub>(p</sub>	Country	Zip	Coun	ntry		8. This corporation has liability for it			
4	25	29	30			Florida Statutes	Yes 🗌	No	
	<ol><li>Name and Address of Curr</li></ol>	ent Registered Agent				10. Name and Address of New Reg	lstered Aç	ent:	
, A	MATTHEWS, EDSEL F., JR.			81	Name				
3	308 S JEFFERSON ST		la la	82	Street Add	iress (P.O. Box Number is Not Acceptab	le)		
P	PENSACOLA FL 32051		L				·		
			1	63					
			}	64	City			85 Zip	Code
			i		•	poration submits this statement for the p tion's board of directors. I hereby accep			
SIGNATUI 12.	Stgc at in , typed or per hear arms of registered OFFICERS A	ND DIRECTORS	13.		t signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFIC			
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NAME	WHIBBS, VINCE, SR. 3201 NAVY BLVD.		1.2 NAM						
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iami	WHIBBS, MARK T.		2.2 NA		}		_		
TREET ADDER	A1410/ D11/				ADDRESS	•			
TY-ST-ZIP	PENSACOLA FL		2. 4 CIT						
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AVE	WHIBBS, GREGORY		3.2 NA	ME			4		
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NAME	MATTHEWS, EDSEL F., JR.	hereng as a section of the	6.2 NA				-		
STREET ADDRE	AAA A IEEEEAAAH AT				ADDRESS				
City-St-ZiP	OCUCADOLA EL		6.4 CIT						

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicarcid 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 on the receipt on trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block of thinged, or on an appears with an address.

SIGNATURE:

SIGNATURE AND TYPEU OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-06-97

904-433-7671

Daytime Phone #