FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Feb 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (6)LAMBERT'S USED CARS, INC. Principal Place of Business Mailing Address 1212 W. 15TH ST 1210 W. 15TH ST * EDDIE LAMBERT -1210 W.15T+ST. 1001 HARRISON AVE -DO NOT WRITE IN THIS SPACE PANAMA CITY FL 32401 PANAMA CITY FL 32401 3. Date Incorporated or Qualified 03/19/1986 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For T# 5,7 1210 W. 59-2689870 Not Applicable 1210 L Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 232401 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LAMBERT, EDWIN O. Lambers -1219 W. 15TH ST dress (P.O. Box Number is Not Acceptable) 82 PANAMA CITY FL 32401 83 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, Soction 607,0505, Florida, Statutes. 2-23-98 nbeng OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1.1 TITLE ___ Change ☐ Addition TITLE LAMBERT, EDDIE 12 NAME NAME 1213 W. 15TH ST. 1.3 STREET ADDRESS STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY+ST-7IP CITY-ST-ZIP DELETE Addition 3.1 TITLE ☐ Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY - ST - ZIP DELETE __ Addition Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELF TE ☐ Change Addition 6.1 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

2-23.98

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 supplier 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 of the receiver of the second or on the receiver of the second of the s 785 6742