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 # 1. Corporation Name

(4)

WHEELER AUTOMOTIVE, INC.

FILED May 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								1 feblite didt eiber tinin beine jill filbir gente pint minte bente binte binte finte febr.
5228 34TH ST N ST. PETERSBURG FL 33714				5228 34TH ST N ST. PETERSBURG FL 33714				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified 04/28/1986
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21			26	26				59-2679 190 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc. 27				5. Certificate of Status Desired See Required Fee Required
City & State			28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country				Zip Country				8. This corporation owes or has paid the current year Intangible
24				30				Personal Property Tax due June 30. Yes No
	9. Name and	nt Regis	tered Agent				10. Name and Address of New Registered Agent	
	:GOWAN, HAR					81	Name	
414 TURNER ST. Clearwater. Fl. 34616						82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
						83		
						84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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 Signatur								
12. OFFICERS AN				· · · · · · · · · · · · · · · · · · ·			ric signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		112.	DELETE	1.1 TI	1LE	Т	Change Addition
NAME	WHEELER,	JOSEPH H.			1.2 N			_ ,
STREET ADDRESS	1480 40 A\				1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	ST. PETE F						T-ZIP	
TITLE		. Z		☐ DELETE	2.1 11			Change Addition
NAME					2.2 N	AME		, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS					2.3 \$	IRE£1	ADDRESS	·
CITY-ST-ZIP					2.40	ITY-S	ST-ZIP	
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NAME					3.2 N	AME	-	
STREET ADDRESS					3.3 S	IREÉT	ADDRESS	
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NAME					4 2 N		1	
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NAME					5.2 N			
STREET ADDRESS							ADDRESS	
_CITY-ST-ZIP				DELETE			T-ZIP	Change Addition
TITLE				☐ DECEIG	6.1 TI		- 1	Li Citalige Li Addition
NAME					6.2 N		ADDRESS	
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP	cortification that there is	formation supplied	with this f	diver done not avalify			T-ZIP	t in Section 119 07(3)(i) Florida Statutes I further certify that the information

The body county that no information supplies with this integrated in section in 19.07(3)(). Florida Statutes, I furner 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 this 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 is changed, or on an attachment with an address.