

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR -7 AM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J30888

(8)

1. Corporation Name

P.C.C. AUTO SALES, INC.

Principal Place of Business

% R. PENELOPE SOBERING
2495 12TH ST
SARASOTA FL 34237
US

Mailing Address

% R. PENELOPE SOBERING
4036 S MARK DR
SARASOTA FL 34232
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1986

3a. Date of Last Report

04/01/1994

4. FEI Number

59-2716508

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

SOBERING, R. PENELOPE
3305 DAWSON ST
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name

82 Street Address (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 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 of a principal officer of corporation and the corporation

(Not a Registered Agent signature required when operating)

(Not)

12. OFFICERS AND DIRECTORS

TITLE

PS

NAME

SOBERING, R. PENELOPE

STREET ADDRESS

3305 DAWSON ST.

CITY, ST, ZIP

SARASOTA FL

TITLE

V

NAME

SOBERING, NICHOLAS

STREET ADDRESS

4036 S. MARK DR

CITY, ST, ZIP

SARASOTA FL

TITLE

T

NAME

MELVIN, ROBERT

STREET ADDRESS

8334 FORRESTER DR

CITY, ST, ZIP

BRADENTON FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(2)(b), 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 approved to exercise this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or Block 14 on an attachment with an address.

SIGNATURE:

R. Penelope Sobering
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PENELOPE SOBERING

4/3/95

813 955-3350