

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

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

3. Date Incorporated or Qualified  
08/28/1986

3a. Date of Last Report  
04/07/1995

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

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

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

ROBERT MELVIN

82

Street Address (P.O. Box Number is Not Acceptable)

2495 12th STREET

83

SARASOTA, FL

84

City

FL

85

Zip Code

34237

11. Pursuant to the provisions of Sections 607.0507 and 607.1502, 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 typed in printed name of registered agent or director (if applicable)

Printed Name of Agent or Director (if applicable)

4/18/96

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PS  
SOBERING, R. PENELOPE  
3305 DAWSON ST.  
SARASOTA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

V  
SOBERING, NICHOLAS  
4036 S. MARK DR  
SARASOTA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

T  
MELVIN, ROBERT  
6334 FORRESTER DR  
BRADENTON FL 34202

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

DELETE: R PENELOPE SOBERING  
←

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

DELETE: NICHOLAS SOBERING  
←

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

ELEVATE TO  
PRES. V, T, S.  
←

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

☐ Change ☐ Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

☐ Change ☐ Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 from an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 941-955-3350

CR2E034 (12/95)