

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 14 AM 10:05

DOCUMENT # J61256 (0)

**1. Corporation Name
PETER'S ROAD SERVICE STATION, INC.**

Principal Place of Business Mailing Address
% STEPHANOS HATZIVASSILOU
1211 STATE ROAD 7
PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **03/11/1987** **3a. Date of Last Report** **02/17/1994**
4. FEI Number **59-2776691** **Applied For** ☐ **Not Accepted** ☐
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
7. This corporation has liability for intangible tax under S. 100.012, Florida Statutes ☒ **Yes** ☐ **No**

2. Principal Place of Business **2a. Mailing Address**
21 **26**
22 **27**
23 **28**
24 **29** **30**

9. Name and Address of Current Registered Agent
HATZIVASSILOU, STEPHANOS
1211 STATE ROAD 7
PLANTATION FL 33317

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. I, undersigned, by 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 to the new address, 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 hereby acknowledging the obligations of, Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.1 DP HATZIVASSILOU, STEPHANO 1211 STATE ROAD 7 PLANTATION FL	1.1 TITLE ☐ Change ☐ Addition
12.2 DST HATZIVASSILOU, CATHY 1211 STATE ROAD 7 PLANTATION FL	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, undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information is accurate and that my signature shall have the same legal effect as if made in person. I am hereby acknowledging the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **02/09/95** **805.581-6840**
MINUTELY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR