

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90183 041 ***150.00

DOCUMENT # J70294

1. Corporation Name
REGISTRY AUTOMOBILES, INC.



Principal Place of Business
2325 ULMERTON ROAD
SUITE 16
CLEARWATER FL 34622
US

Mailing Address
2325 ULMERTON ROAD
SUITE 16
CLEARWATER FL 34622
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1987

4. FEI Number

59-2798288

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☒ No

2. Principal Place of Business
21 3051 Tech Dr.
Suite, Apt. #, etc.

2a. Mailing Address
26 SAME
Suite, Apt. #, etc.

City & State
23 St. Petersburg, FL
Zip 33716 Country USA

City & State
28
Zip Country

24 33716 25 USA

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUPONT, THOMAS L.
2325 ULMERTON ROAD, SUITE 16
SUITE 2000
CLEARWATER FL 33762

81 Name

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

3051 Tech Dr.

83

84 City St. Petersburg

FL

85 Zip Code 33716

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DT
NAME CHAPMAN, STEVEN
STREET ADDRESS 2325 ULMERTON ROAD, SUITE 16
CITY-ST-ZIP CLEARWATER FL 33762

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 3051 Tech Dr.
1.4 CITY-ST-ZIP St. Petersburg, FL 33716

TITLE DP
NAME DUPONT, THOMAS L.
STREET ADDRESS 2325 ULMERTON ROAD, SUITE 16
CITY-ST-ZIP CLEARWATER FL 33762

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 3051 Tech Dr.
2.4 CITY-ST-ZIP St. Petersburg, FL 33716

TITLE DS
NAME KENNEDY, ERIC V.
STREET ADDRESS 2325 ULMERTON ROAD, SUITE 16
CITY-ST-ZIP CLEARWATER FL 33762

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 3051 Tech Dr.
3.4 CITY-ST-ZIP St. Petersburg, FL 33716

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0411914