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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

K19641

(5)

KEITH'S OIL CAN, INC.

**FILED** Apr 03 1998 8:00am Secretary of State



1205 OLD DIXIE HWY VERO PCH FL 32960  1205 OLD DIXIE HWY VERO PCH FL 32960  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
VERO PCA FL 32960  VERO BOX FL 32960  DO NOT WRITE IN THIS SPACE	
000	
5. Date incorporated of Columbia	
0.0014000	
2. Principal Place of Eusinest 2a. Mailing Address 14. FEI Number App	olied For
27 2643 St. hum (11128 2642 St. Luie luk 65-0044950 Noi	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5, Certificate of Status Desired	
22] Pee Heq	<u> </u>
City & State Color Campaign Financing \$5.00 N  23 V (1 y Color Campaign Financing Contribution Added to	
Zip Country 20 Country 8. This corporation owes or has paid the current year Intar	
24 5 9 5 20 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	No
Mine Marie	
3111 CARDINAL DR  VERO BCH FL 32960  82 Street Address (P.O. Box Number is Not Acceptable)	
VERO BCH FL 32960	
84 City (	9990
Ven Beach FL 32	<u>^1 5</u>
11. Pursuant to the provisions of Sections 0770502 and 607.1598, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida Sach change was authorized by the corporation's board of directors. I hereby accept the appointment as re-	registered eaistered
agent, I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.	_
SIGNATURE \ MC   MC   Marc 3/00 90	<b>)</b>
Signature that or greated natural region and the displacable (NOTE: Registered Agent signature required when reinstating) DAM  12. OFTUCERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
<u></u>	Addition
	Hotalion
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LEDG BOULE	
	Addition
3.0	Addition
AAAA GARRIIIN DO P	
1 UPOA BAU FI	
CITY-ST-ZIP   VERO BUT FL	Addition
NAME 32 NAME	L. Addition
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-S1-ZIP   34. CITY-S1-ZIP   TITLE   Change   Change	Addition
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NAME 4 2 NAME	
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	L_1 MOURION
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP	Addition
	☐ Vooiiioii
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
0.4 CITY-ST- 2/P	

indicated on this armulal 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 empewered 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 oddress.