Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90122 029 \*\*\*150.00

## 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

## DOCUMENT # K73439

1. Corporation Name

MAJOR AUTO ELECTRIC, INC.

	_								
Principal Place of Business		Mailing Address				I (BEIGH) EN 1988 1111 EIST ANN EIST EIST EIST EIST EIST EIST EIST EIST			
C/O JAMES B. CALLUS		C/O JAMES B. CALLUS							
131 108TH AVE		131 108TH AVE.				DO NOT WRITE IN THIS SPACE			
TREASURE ISLA	AND FL 33706	TREASURE ISLAND FL 33	700			3. Date I corporated or Qualifed	٦		
						03/16/1989	-		
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number Applied For	7		
21		26				<b>59-2934600</b> Not Applicable	1		
Suite, Apt. #, etc.		Suite, Apt, #, etc.				5. Certificate of Status Desired 58.75 Additional	7		
22		27				5. Certificate of Status Desired Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip Cour.try		——————————————————————————————————————		ountry		8. This corporation owes the current year intangible			
24	25	29	30			Personal Property Tax.	-		
	9. Name and Address of Curre	nt Registered Agent		-		10. Name and Address of New Registered Agent	ᅱ		
ACH	TEV ALCCOTT			81	Name	· 	j		
	LEY, H SCOTT			82	Street A	Address (P.O. Box Number is Not Acceptable)			
	108TH AVE. ASURE ISLAND FL 33706				<u>-</u>		4		
INE	ASOME ISLAND PL 33706			83		•			
				84	City	85 Zip Code	7		
				لب		FL   O Les control	4		
office crr	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was	. autnoriz	ea by	tne corpo	d or rporation submits this statement for the purpose of changing its registered contition's board of directors. I hereby accept the appointment as registered			
SIGNATUFE	Signature, typed or printed na ne of registered ag	ent and title if applicable (NO)	E Register	ed Agen	t signature re	required when reinstating) DATE	1		
12.		NO DIRECTORS	1:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DPVS	☐ DELETE	1.1	TITLE		Change Addition	'n		
NAME	ASHLEY, H SCOTT		1.2 NA		ì		1		
STREET ADDRESS 131 108TH AVE.			1.3 STRE		ADDRESS				
CITY+ST-ZIP	TREASURE ISLAND FL				r- ZIP		_}		
TITLE	(1121001121011211211211211211211211211211	☐ DELETE	_	TITLE		T ☐ Change ★ Additio	n		
NAME :			2.2 NAME			Ashley, Lisa			
STREET ADDRE 3S			2.3	STREET	ADDRESS	131 108th Ave			
CITY-ST-ZIP			2.4	CITY-5	T-ZIP	Treasure Island, FL 33706	┙		
TITLE		☐ DELETE	31	TITLE		Change Additio	n		
NAME			3.2	NAME	1		-		
STREET ADDRESS			3.3	STREET	ADDRESS	;	- }		
CITY-ST-ZIP			3.4	CITY-S	T-ZIP				
TITLE		DELETE	4 1	TITLE		☐ Change ☐ Addition	n		
NAME			4. 2	NAME	1		1		
STREET ADDRESS			4 3	STREET	ADDRESS				
CITY-ST-ZIP			4.4	CITY-S	ſ-ZIP		╛		
TITLE		☐ DELETE	5.1	TITLE		Change Addition	m		
NAME			5.2	NAME			-		
STREET ADDRESS			53	STREET	ADDRESS				
CITY-ST-ZIP	<u> </u>			CITY-S	T-ZIP	<u> </u>	_		
TITLE		☐ DELETE	6.1	TITLE		Change Addition	'n		
NAME			6.2	NAME	J				
CEDECT ADDRES C			6.3	STREET	ADDRESS	\$	1		

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 contriguent 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.

6.4 CITY-ST-ZIP

SIG	:N	Δ	T	IR	F

CITY-ST-ZIP