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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATUR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K85880 (8)

COPHER U-PULL-IT OF CLEARWATER, INC.

rincipal Place of Business	Mailing Address
5015 22ND ST. CAUSEWAY	P.O. BOX 1408
Tampa Fl 33619	BRANDON FL 33509
US	US

FILED Apr 17 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2933437 21 26 Not Applicable Suite, Apt. #, etc. Suita, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHAHEEN, JOSEPH L. JR., ESQ 501 EAST KENNEDY BLVD, SUITE 1250 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33602** 63 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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 hen reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change ___ Addition COPHER, RONALD NAME 1.2 NAME 114 HICKORY CREEK RD. STREET ADDRESS 1.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 1.4 CITY - ST- ZIP TITLE DELETE Addition 2.1 TITLE Change NAME COPHER, RICHARD 2.2 NAME 912 RIVER RAPIDS AVE. STREET ADDRESS 2.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP DELETE TITLE 3.1 TITLE Change Addition HUDSON, ERVIN NAME 32 NAME 401 VALRICO-SEFFNER ROAD STREET ADDRESS 3.3 STREET ADDRESS VALRICO FL CITY-ST-2IP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition WAGNER, JAMES NAME 4. 2 NAME 1811 NOVA DRIVE STREET ADDRESS 4.3 STREET ADDRESS **VALRICO FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE GALENTINE, DENNIS W. NAME 5.2 NAME 18317 CITATION STREET STREET ADDRESS 5.3 STREET ADDRESS **LUTZ FL** City-St-ZiP 5 4 CITY-ST-ZIP THLE DELETE Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS** CITY - ST - ZIP 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 attackment with an address.

DENMS W. GALENTINE 用排件

813-247-3171 4/8/98