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 # L16254

1. Corporation Name

A-1 TRANSMISSIONS, AUTO AIR AND USED CARS, INC.

Principal Place of Business

Mailing Address

1900 FAST AVENUE

1900 EAST AVENUE

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90021 021 ***150.00



| PANAMA CITY FL 32405 | AMA CITY FL 32405 PANAMA CITY FL 32405 | | DO NOT WRITE IN THIS SPACE | | | | |
|---|--|------------------|---|-----------------------------------|--|--|--|
| | | | 3. Date Incorporated or Qualifed | | | | |
| | | | 09/14/1989 | | | | |
| 2. Principal Place of Business | 2a. Mailing Address | Ι Δ | 4. FEI Number | Applied For | | | |
| 21 24361/2 Dimond A | Ve 26 2436 UIMOI | id Hur. | 59-3004923 | Not Applicable | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | <u> </u> | 5. Certifcate of Status Desired | \$8.75 Additional Fee Required | | | |
| City & State 23 Panamu City, Floris | Ja 28 Panama C. | y Florida | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | | |
| Zip 32405 25 115 A | □ 22105 □ ' | Lintry USA | This corporation owes the current year Personal Property Tax. | Intangible ☐ Yes ☐ No | | | |
| 9. Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | | | |
| GRANGER,DARRELL R. | | 81 Name Fo | Ina E Granger | | | | |
| 1900 EAST AVENUE | | 82 Street Addres | s (P.O. Box Number is Not Acceptable) | venue | | | |
| PANAMA CITY FL 32405 | | 83 | | | | | |
| | | 84 City Pa | nama City F | L 85 Zip Cod 05 | | | |
| 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.

| -9 | | | | 0- 4 | 90 1014 | |
|----------------|--|----------|-------------------------------|---|-------------------|------------|
| SIGNATURE | Eignature, typed or printed name of registered agent and title if as | NOTE: B | Registered Agent signature re | activited when reinstation) | DATE | 7_ |
| 12. | OFFICERS AND DIRECT | <u> </u> | 13. | ADDITIONS/CHANGES TO OFFI | CERS AND DIRECTOR | RS IN 12 |
| TITLE | DP | DELETE | 1.1 TITLE | THE POLICE | hange | ☐ Addition |
| NAME | GRANGER, DARRELL R. | - \ | 1.2 NAME | | | ; |
| STREET ADDRESS | 1900 EAST AVENUE | | 1,3 STREET ADDRESS | | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 1.4 CITY-ST-ZIP | | | |
| TITLE | DVP | DELETE | 2.1 TITLE | President | Change | ☐ Addition |
| NAME | Granger, edna e. | | 2.2 NAME | President Edna E. Branger 2436 Yz Ormond A Panama City, FL | | |
| STREET ADDRESS | 1900 EAST AVENUE | | 2.3 STREET ADDRESS | 2436 12 Ormand M | <i>jenue</i> | |
| CITY-ST-ZIP | PANAMA CITY FL | | 2. 4 CITY-ST-ZIP | Panama City, FL | 32405 | |
| TITLE | DVP | DELETE | 3.1 TITLE | • | ☐ Change | ☐ Addition |
| NAME | BRAUN, RICHARD S | ` | 3.2 NAME | | | |
| STREET ADDRESS | 2413 ORMOND AVE | | 3 3 STREET ADDRESS | | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 3.4. CITY-ST-ZIP | | | |
| TITLE | S | □ DELETE | 4.1 TITLE | | ☐ Change | Addition |
| NAME | Braun, Sharron G | | 4, 2 NAME | | | |
| STREET ADDRESS | 2413 ORMOND AVE | | 4.3 STREET ADDRESS | | | : |
| CITY-ST-ZIP | PANAMA CITY FL 32405 | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | □ DELETE | 5.1 TITLE | | Change Change | ☐ Addition |
| NAME | | | 5.2 NAME | | | , |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 C/TY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 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 attachment with an address, with all other like empowered.