FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1996			Secretary of State DIVISION OF CORPORATIONS						
orporation realing									
SPEN	NCE SERVICE STATION	I, INC.							
24795 S. DIXIE AVENUE			ling Address 24795 S. Dixie Avenue Princeton Fl. 33032-3825			I IONERALI INCOPAL AN	803 10461 1010F 1011 04(III BIBAT BYOK I	/14/1 B10/1 6/0/1 100)
						3. Date Incorporated or Qu 08/24/1987	ualified 3a. Di	ate of Last F 01/18/	
2. Principal Pla	ice of Business	<u>}</u> —-¬	ng Address			4. FEI Number	L	01,10,	Applied For
Suite, Apt. #	, etc.	26 Suite	Apt. #, etc.			59-2835287			Not Applicable
2		27				5. Certificate of Status Des	sired 📋		5 Additional Required
City & State		<u>├</u>	ß State			6. Election Campaign Final			00 May Be
7 ₁ p	Country			Count	'nı	Trust Fund Contribution		Adde	ed to Fees
4	25	29		30		This corporation has fiable Florida Statutes	oility for intangible Yes No	tax under s	199.032,
	9. Name and Address of Co	urrent Registered	Agent		4	10. Name and Address of		d Agent	
SHAPIF	RO, IRA R.				1 Name				
13899	BISCAYNE BLVD.			8		ress (P.O. Box Number is Not Ai	cceptable)		
SUITE	105 FL 33181			8	3				
MINITER	FL 03101			8	4 City		FI	85 Zi	p Code
SIGNATURE	d agent, or both, in the State of it, and accept the obligations of,	agent and tile if applicable	oned Old. Stock	E. Registered Ag	ont signature required	d when roinstathy)	DATE		
TLE T	0	AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES 1	O OFFICERS AN		
AME	SPENCE, ARTHUR, JR.		-	1.2 NAME	ſ			☐ Change	☐ Addition
PREET ADDRESS	9022 SW 123RD CT. # MIAMI FL	0305		1.3 STREI	ET ADDRESS				
TLE	D MIAMI FL		DELETE	14 CITY-					
AME	SPENCE, ARTHUR, SR.		bttcit	2 1 TITLE 2.2 NAME				☐ Change	Addition
HEET ADDRESS	9022 SW 123RD CT. #	0305			T ADDRESS				
IY-SI-7/P	MIAMI FL		T bours	2.4 CITY-					
ME		L	DELETE	3. 1 TITLE 3.2 NAME				Change	☐ Addition
REET ADDRESS					E1 ADORESS				
TY-ST ZIP				3.4 CITY-	ĺ				
ME .		[DELETE	4. 1 TITLE				Change	Addition
REET ADDRESS				4.2 NAME	ADDRESS				
T∀-ST-ZIP				4.4 CHY-					
LE			DELETE	5. 1 TITLE				Change	☐ Addition
ME REFT ADDRESS				5 2 NAME					
Y-ST-ZIP					T ADDRESS				
LF.			DELETE	6 1 TITLE	DI TEIT			Change	Addition
ME				6 2 NAME]		ı		
REET ADDRESS				6.3 STREET	ADDRESS				
TY-ST-ZiP 4. I do hereby c	ertify that the information suppli	ed with this filing is v	voluntarily	6.4 CITY-S		r the exemption stated in Section	0.110.02/2023	wide Other	- 14.3
Cerilly inat in	ne information indicated on this a im an officer or director of the co	INDUAL KANATA AK ALIAH	alamania din 🖎 🕕	report is tru	and accurate this	e and that my signature shall have report as required by Charter 6	ve the same legal	effect as if	s. I further made under
appears in Bi	llock 12 or Block 13 if changed	or a attachmen	with an address	s.		report as required by Griapter to	ivr, rionda statut	es; and that س	. my name
IGNATU				X_{ϵ}		4	-20-	91	
		D OR PRINTED NAME OF	SIGNING OFFICER C	OR DERECTOR		Date		aytime Phone #	