

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000016899

1. Entity Name
T N T USED AUTO SALES, INC.



FILED

04 SEP -3 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2585 SURFSIDE BLVD
CAPE CORAL, FL

Mailing Address
2585 SURFSIDE BLVD
CAPE CORAL, FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08122004

Chg-P

CR2E034 (10/03)

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MANGIONE, PHIL
2585 SURFSIDE BLVD
CAPE CORAL, FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPT ☐ Delete
NAME MANGIONE, PHIL
STREET ADDRESS 2585 SURFSIDE BLVD
CITY-ST-ZIP CAPE CORAL, FL

TITLE V ☐ Delete
NAME SOLIERI, THOMAS
STREET ADDRESS 2585 SURFSIDE BLVD
CITY-ST-ZIP CAPE CORAL, FL

TITLE S ☒ Delete
NAME HAMMOND, TIMOTHY L
STREET ADDRESS 1137 SW 31 TER
CITY-ST-ZIP CAPE CORAL, FL 33914

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Phil Mangione
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

300041069413
09/14/04--01066--005 **150.00

8/26/04

Attachment

Doc # D03000016899

**TNT Used Auto
Sales, Inc.**

Memo

To: Division of Corporation
From: Philip Mangione Pres.
RE: 2004 For Profit Corporation Annual Report
Date: 08/30/04

Dear Sir.

Please forgive me of the penalty that you have assessed \$400.00. The reason for the forgiveness is as follows

- 1) The report was filed on time for 2004. Filed in January. The company just was incorporated but was inactive. I did not get a preprinted report. My accountant had to get his own.
- 2) The check that was enclosed was not cashed. I should have checked. I am sorry.
- 3) The company is going to start operations towards the end of 2004. Please help me I am presently having a tough time starting my business. The Hurricane Charlie did not help.

I called your department and gave the above reasons. This will not happen again. The individual told me to pay the 150.00 fee ASAP and make sure future reports are filed on a timely basis. Thank You.

From:


Philip Mangione