

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

**FILED**

**Mar 06 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P92000004193 (8)**

1. Corporation Name  
**SUN COAST UNDERCAR WAREHOUSE, INC.**



Principal Place of Business

Mailing Address

**C/O INSTALLERS EXPRESS  
 UNIT #11  
 FORT MYERS FL 33901  
 US**

3. Date Incorporated or Qualified  
**11/13/1992**

3a. Date of Last Report  
**04/12/1996**

2. Principal Place of Business

2a. Mailing Address

21 **C/O INSTALLERS EXPRESS**

26 **3800 FOWLER ST.**

22 **UNIT # 11**

27 **UNIT 11**

23 **FORT MYERS FL.**

28 **FORT MYERS, FL.**

24 **33901**

25 **US**

29 **33901**

30 **US**

4. FEI Number  
**65-0369599**

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

**\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SON COAST UNDERCAR WAREHOUSE, INC  
 3800 FOWLER ST., UNIT 11  
 FT. MYERS FL 33901**

81 Name

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

83

84 City

**FL**

85 Zip Code

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.

SIGNATURE

Signature of the person authorized to register the agent, and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
 NAME **S RIGONI, MICHAEL G.**  
 STREET ADDRESS **3117 SE 18TH AVENUE**  
 CITY - ST - ZIP **CAPE CORAL FL**

1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY - ST - ZIP

TITLE  DELETE  
 NAME **P RIGONI, RICARDO O**  
 STREET ADDRESS **407 SW 37TH STREET**  
 CITY - ST - ZIP **CAPE CORAL FL**

2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY - ST - ZIP

TITLE  DELETE  
 NAME **V RIGONI, PAULA J**  
 STREET ADDRESS **3117 SE 18TH AVENUE**  
 CITY - ST - ZIP **CAPE CORAL FL**

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY - ST - ZIP

TITLE  DELETE  
 NAME **T RIGONI, NANCY L.**  
 STREET ADDRESS **407 SW 37TH STREET**  
 CITY - ST - ZIP **CAPE CORAL FL**

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY - ST - ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY - ST - ZIP

14. I do 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 in an attachment with an address

SIGNATURE: *Ricardo O. Rigoni*  
 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

**2/18/97**  
 Date

**941-275-9977**  
 Daytime Phone #

CR2E034 (9/96)