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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000004193 (8)

SUN CO	DAST UNDERCAR WAREHO	USE, INC.			٠	() \$ \$ \$ (4 6 6 6 6 6 6 6 6 6	88111 2:16 1 11818 (2186 11)	1361	
_	<u> </u>							∭	
Principal Place	e of Business	Mailing Address	Mailing Address			a individut life raren bindt maire darin aunit naire	ABIDI ANDON HASA LAIKA LI IL	1881	
C/O INSTALLE	ERS EXPRESS	3800 FOWLER ST.				}			
UNIT #11 FORT MYERS FL 33901		UNIT 11 FORT MYERS FL 33901				DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualified			
						11/13/1992			
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	Applied	For	
21		26				65-0369599		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additi	- 1	
City & State		City & State					Fee Require		
_		28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fe		
23 Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the			
24	25]	29	30			Personal Property Tax due June 30.	Yes No		
g. Name and Address of Current					10. Name and Address of New Register	ed Agent			
SO	N COAST UNDERCAR WAREHOL	JSE. INC		81	Name				
	O FOWLER ST., UNIT 11		82 Street Ad			ess (P.O. Box Number is Not Acceptable)			
FT. MYERS FL 33901									
				63					
				84	City		85 Zip Code	,	
				l. l	·	. <u></u>	·L		
 Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, toffice or registered agent, or both, in the State of Florida Such change was authorities. 					named corporati	oration submits this statement for the purpos ion's board of directors. I hereby accept the	e of changing its reg appointment as regis	istered tered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fi	orida Stat	tutes.				1	
SIGNATURE			F. David			ed when reinstating) DAT			
12.	Ilgnature, typed or printed name of registered agent and title if applicable (NOTE: Registere OFFICERS AND DIRECTORS 13.		a Agen	signature require	ed when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS		12		
TITLE	8	DELETE		1.1 TITLE		ABBITION OF THE STATE OF THE ST		Addition	
NAME	RIGONI, MICHAEL G.		1.2 N/	1.2 NAME				Ì	
STREET ADDRESS	3117 SE 18TH AVENUE		1.3 \$1	TREET A	DDRESS				
CITY-ST-ZIP	CAPE CORAL FL		1.4 CI	1.4 CITY - ST - ZIP					
TITLE	P	DELETE	2.1 70	TLE			☐ Change ☐	Addition	
NAME	RIG ONI, RICARDO O		2.2 N/	AME		6 , 2			
STREET ADDRESS	407 SW 37TH STREET		2.3 \$1	TREET A	DDRESS	•		- 1	
CITY-ST-ZIP	CAPE CORAL FL			HTY-SI	- ZIP				
TITLE	V SAME A	DELETE	3.1 Tf				Change	Addition	
NAME	RIGONI, PAULA J		3.2 N/					Ţ	
STREET ADDRESS	3117 SE 18TH AVENUE				DDRESS			j	
CITY-ST-ZIP TITLE	CAPE CORAL FL	DELETE	3.4. C	TIF	-ZIP		Change	Addition	
NAME	RIGONI, NANCY L.	ل مربر از	4.CII		ĺ		لـــا مەرەرىس	· JOHNIOII	
STREET ADDRESS	407 SW 37TH STREET				DDRESS			ļ	
CITY-ST-ZIF	CAPE CORAL FL		4.4 CITY - S						
TITLE		DELETE	5.1 TI		611		Change	Addition	
NAME			5.2 NA						
STREET ADDRESS			5.3 STREET		DORESS			, j	
CITY-ST-ZIP				ITY-ST-	•				
TITLE		DELET E	6.1 T!				Change	Addition	
NAME			6.2 NA	AME				J	
STREET ADDRESS			6.3 S1	TREET A	.ddress			j	
CITY-ST-ZIP			6.4 CI	ITY-ST-	ZIP				

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 of the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporati

FILED

Apr 28 1998 8:00am

Secretary of State