

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000012978 (1)

1. Corporation Name:

STRAIGHT DEALS AUTO SALES INC.



Principal Place of Business
4175 HWY 427
SANFORD FL 32773
US

Mailing Address
4175 HWY 427
SANFORD FL 32773
US

3. Date Incorporated or Qualified
02/22/1993

3a. Date of Last Report
08/08/1995

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

4. FEI Number
59-3164809

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

KELLY, MORRIS
305 SABAL PALM DR.
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name MORRIS KELLY
82 Street Address (P.O. Box Number is Not Acceptable)
4175 CR 427
83
84 City SANFORD FL 85 Zip Code 32773

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

MORRIS KELLY

(NOTE: Registered Agent signature required when resigning)

DATE

4/23/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
P	KELLY, MORRIS	305 SABAL PALM DR.	LONGWOOD FL 32750	<input type="checkbox"/>
T	KELLY, MORRIS	305 SABAL PALM DR.	LONGWOOD FL 32750	<input type="checkbox"/>
S	KELLY, MORRIS	305 SABAL PALM DR.	LONGWOOD FL 32750	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P	MORRIS KELLY	4175 CR 427	SANFORD FL 32773	<input type="checkbox"/>
T	MORRIS KELLY	4175 CR 427	SANFORD FL 32773	<input type="checkbox"/>
S	MORRIS KELLY	4175 CR 427	SANFORD FL 32773	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MORRIS KELLY

4/23/96

328-6044

Daytime Phone #

CR2E034 (12/95)