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

CORPORATION ANNUAL REPORT

1997

SIGNATURE: ,



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P93000014825 (2)**

SUNCOAST AUTO REPAIR CENTER, INC. Principal Place of Business Mailing Address 1198 EAST BAY DR 1198 EAST BAY DR **LARGO FL 34640** LARGO FL 33770-2533 3. Date Incorporated or Qualified 3a. Date of Last Report 02/19/1993 04/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3164849 Not Applicable [21] Suite. Ant. #. etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State Oity & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes \(\sigma\) No 25 29 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROWN, DEBRA L 1198 E BAY DR 82 Street Address (P.O. Box Number is Not Acceptable) LARGO FL 34640 63 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered office or rigistered agent or holb, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent than familiar with land accept the obligations of, Section 607.0505, Florida Statutes. mistory, typed copic to succeed the policied agent and title trapposable (NOTE. Biggistered Agent signature required when ministating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change 1143 BROWN, LARRY K NAME 1.2 NAME 9280 54TH ST N STELL ACORDS 1.3 STREET ADDRESS PINELLAS PARK FL 1.4 CITY - ST - 7(P CHY-ST 76 **VPST** DELETE Channe Addition 1.161 2.1 TiTLE Brown, Debra L 22 NAME NAME 9280 54TH ST N STREET ADDRESS 2.3 STREET ADDRESS PINELLAS PARK FL 2. 4 CITY-ST-ZIP C-1Y - ST - 7IP TELE DELETE 31 TITLE ☐ Change Addition NAME 3 2 NAME 3.3 STREET ADDRESS STREET ALORESS 3.4. CITY-ST-ZIP 0[18 SE-76] DELETE Change Addition 4.1 TITLE 111.6 N.75 4. 2 NAME STREET ADDRESS. 4.3 STREET ADDRESS OHY SI ZIII 4.4 CITY - \$1 - ZIP DELETE Change Add tion TillE 51TITLE NAMi 5.2 NAME STREET ADDRES 5.3 STREET ADDRESS COTY - ST- 702 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE Change 6.2 NAME NAME 6.3 STREET ADDRESS STEEL ATORESS 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

Debra L. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

The information indicated on this annual report of is true and accurate and that my signature shall have the same legal effect as if made under oath; that Lam an officer or director of the corporation or the receiver or trustac empowered to execute this report as required by Chapter 60?, Florida Statutes, and that my name appears in Block 12 or Block 13.1 changed or on an attrachment with an address.

FILED

Mar 25 1997 8:00am

Secretary of State