PROFIT CORPORATION ANNUAL REPORT		FLORIDA DEPAR Sandra B.	Mortham		1997 8:00an
1997		Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
& B MOBIL MART, IN	93000017 Ic.	029 (8)			
sipal Place of Business MEMORIAL HWY. A FL 33615	5935	ling Address MEMORIAL HWY. PA FL 33615-5015		T 103 MODD NO 10100 MINT 0000 0000 1000	a Tust ninki takli Apliki tisha taki tasi
				3. Date Incorporated or Qualified 03/01/1993	3a. Date of Last Report 02/07/1996
rincipal Place of Business	2a. 26	Mailing Address		4. FEI Number 59-3170281	Applied For Not Applicable
uite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
liy & State		City & State		 Election Campaign Financing Trust Fund Contribution 	\$5.00 May Be
· · · · · ·	· • • • • •	Zip	Country	8. This corporation has liability for	
25 9. Name and Ad	29 Idress of Current Registe		30	10. Name and Address of New Re	
GEORGE I. SANCHEZ,	, P.A.		61 Name		
3446 E LAKE RD SUITE 214			82 Street Add	Iress (P.O. Box Number is Not Acceptat	ple)
	44F		83		
PALM HARBOR FL 34	685				
		17.1508, Florida Statute a. Such change was a	84 City es, the above-named cor authorized by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	FL 85 Zip Code Durpose of changing its registered put the appointment as registered
Pursuant to the provisions of S office or registered agent, or I agent I am familiar with, and IATURE. Signature, typed or protect		tapplicable. (NOTE		poration submits this statement for the p tion's board of directors. I hereby accep ired when reinstaling) ADDITIONS/CHANGES TO OFFIC	FL purpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12
Pursuant to the provisions of S office or registered agent, or agent 1 am familiar with, and NATURE. Signature, typed or protect PD	Sections 607.0502 and 60 both, in the State of Florid accept the obligations of, name of registered agent and tille if OFFICERS AND DIREC	l applicable. (NOTE	es, the above-named cor uthorized by the corpora prida Statutes. E Registered Agent signature requ 13. 1.1 TITLE	ired when reinstaling}	FL purpose of changing its registered pt the appointment as registered
Pursuant to the provisions of S office or registored agent, or I agent 1 am familiar with, and JATURE. Signature, typest or printed PD PINCKNEY, EAR PONCKNEY, EAR	Sections 607.0502 and 60 both, in the State of Florid accept the obligations of, name of registered age 1 and tille if OFFICERS AND DIREC IL F	tapplicable. (NOTE	es, the above-named cor iuthorized by the corpora rida Statutes. E Registered Agent signature requ 13.	ired when reinstaling}	FL purpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12
Pursuant to the provisions of S office or registered agent, or I agent I am familiar with, and IATURE. Signature, typest or protect PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3381	Sections 607,0502 and 60 both, in the State of Florid, accept the obligations of, remin of registered egent and tills if OFFICERS AND DIREC IL F L HWY	I applicable. (NOTE TORS	E Registered Agent signature required I.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
Pursuant to the provisions of S office or registered agent, or I agent I am familiar with, and IATURE. Signature, typest or prodect PD PINCKNEY, EAR 5935 MEMORIAL TAMPA EL 2021	Sections 607,0502 and 60 both, in the State of Florid, accept the obligations of, name of registered age 1 and tile if OFFICERS AND DIREC IL F L HWY 5	tapplicable. (NOTE	es, the above-named cor uthorized by the corpora prida Statutes. E Repisiered Agent sprature requinant 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ired when reinstaling}	FL purpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12
Pursuant to the provisions of S office or registored agent, or I agent 1 am familiar with, and IATURE. Signature, typest or protect PD PINCKNEY, EAR 5935 MEMORIAL STD PINCKNEY, BAR 5935 MEMORIAL STD PINCKNEY, BAR 5935 MEMORIAL	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicable. (NOTE TORS DELETE	E Registared Agent signature required a Statutes. Registared Agent signature required a statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
Pursuant to the provisions of softice or registered agent, or lagent 1 am familiar with, and NATURE Signature, ignest or predict PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3381 STD PINCKNEY, BAR 5935 MEMORIAL STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3381	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicable. (NOTE TORS DELETE	E Registered Agent signature required a Statutes. Registered Agent signature required a statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition
Pursuant to the provisions of S office or registered agent, or I agent I am familiar with, and NATURE Signature, typest or protect PD PINCKNEY, EAR 5935 MEMORIAI TADDRESS STD PINCKNEY, BAR 5935 MEMORIAI STD PINCKNEY, BAR 5935 MEMORIAI TADDRESS 5935 MEMORIAI TAMPA FL 3361	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE	E Registared Agent signature requiring a Statutes. Registared Agent signature requiring a Statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent T am familiar with, and NATURE Signature, typest or pratect PD PINCKNEY, EAR 5935 MEMORIAL TADDRESS STD PINCKNEY, BAR 5935 MEMORIAL STD PINCKNEY, BAR 5935 MEMORIAL TADDRESS S1-ZIP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE	Bes, the above-named corruthorized by the corporation of the corp	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE T ADDRESS S1-2iP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE	es, the above-named cor uthorized by the corpora prida Statutes. E Registared Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE Signature, spector prailed PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3381 STD PINCKNEY, BAR 5935 MEMORIAL STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3381	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I epplicatre. (NOTE TORS	Bes, the above-named corruthorized by the corporativity of the corporativity of the corporative required Agent signature required as the second statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE Signature: typest or protect PD PINCKNEY, EAR 5935 MEMORIAL TADDRESS ST-ZIF T ADDRESS ST-ZIF T ADDRESS ST-ZIF	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I epplicatre. (NOTE TORS	Bes, the above-named corruthorized by the corporativity of the corporativity of the corporative required Agent signature required as the second statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE T ADDRESS S1-2IP T ADDRESS S1-7IP T ADDRESS S1-7IP T ADDRESS S1-7IP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I epplicatre. (NOTE TORS	Bis, the above-named cor suthorized by the corpora prida Statutes. E Registered Agent signature requ- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ired when reinstaling}	FL burpose of changing its registered pl the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE. Signature, typest or protect PD PINCKNEY, EAR 5935 MEMORIAL TADRESS S1-2IP TADRESS S1-2IP T ADDRESS S1-7IP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE DELETE DELETE DELETE	Bis, the above-named cor huthorized by the corpora prida Statutes. E Registered Agent signature requ- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent I am familiar with, and NATURE Signature, typest or predect PD PINCKNEY, EAR 5935 MEMORIAL TADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE DELETE DELETE DELETE	Bis, the above-named cor suthorized by the corpora prida Statutes. E Registered Agent signature requ- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE Signature, typest or prailed PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3361 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3361 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3361 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3361 S1-7/P	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE DELETE DELETE DELETE	Bis, the above-named cor iuthorized by the corpora Frequisiared Agent signature requ- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIFLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIFLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ired when reinstaling}	FL burpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE Signature, typest or protect PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3381 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3381 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3381 S1-ZIP	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, name of represent and tile if OFFICERS AND DIREC IL F L HWY 5 IBARA J L HWY	I applicatre. (NOTE TORS DELETE DELETE DELETE DELETE	Bas, the above-named corruthorized by the corporative service of the service	ired when reinstaling}	FL Durpose of changing its registered pit the appointment as registered DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 Change Addition
Pursuant to the provisions of S office or registered agent, or I agent 1 am familiar with, and NATURE. Signature, typed or protect PD PINCKNEY, EAR 5935 MEMORIAL TAMPA FL 3381 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3361 STD PINCKNEY, BAR 5935 MEMORIAL TAMPA FL 3361 ST-7/P E ET ADDRESS ST-7/P E ET ADDRESS ST-7/P E ET ADDRESS ST-7/P E ET ADDRESS ST-7/P	Sections 607.0502 and 60 both, in the State of Florida accept the obligations of, of FICERS AND DIREC IL F L HWY 5 XBARA J L HWY 5	I applicatore. (NOTE TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	Bis, the above-named cor Iuthorized by the corpora Frequisiared Agent signature requi- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ired when reinstaling}	FL Datrpose of changing its registered pt the appointment as registered DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition