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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000024209 (7)

TMS AUTOMOTIVE, INC.

Principal Place of Business Mailing Address 8100 ULMERTON RD 8100 ULMERTON RD BLDG. 7-A BLDG. 7-A DO NOT WRITE IN THIS SPACE LARGO FL 34641 **LARGO FL 34641** 3. Date incorporated or Qualified 03/30/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3159018 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intengible 24 29 Personal Property Tax due June 30. Yes 25 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MOON, FURNAM G 8100 ULMERTON RD 82 Street Address (P.O. Box Number is Not Acceptable) BLDG. 7-A 83 **LARGO FL 34641** 84 City Zip Code 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, typed or printed none of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ☐ Addition TITLE 1.1 TITLE MOON, FURMAN G. 1.2 NAME NAME 1744 30TH AVE., NO. STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY-S1-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BUCKNER, JAMES F. 2.2 NAME NAME 1029 10TH ST., NW, APT. A STREET ADDRESS 2.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 2.4 City-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MOON, FAYE H. NAME 3.2 NAME STREET ADDRESS 1744 30TH AVE., NO. 3.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-ST-ZIP CITY-ST-ZIP DELETE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS**

FURMAN G. MOON 4-29-98 SIGNATURE: THE MAN GO THE STATE OF THE STATE

6.4 CITY-ST-ZIP

14. Thereby 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 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 13 if changed, or on an attachment with an address.

FILED

May 13 1998 8:00am

Secretary of State