SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # P93000053121 (8) RONDO'S TEN MINUTE OIL CHANGE, INC. Mailing Address Principal Place of Business 2015 THOMAS DR. 2015 THOMAS DR. PANAMA CITY BEACH FL 32408 PANAMA CITY BEACH FL 32408 3a. Date of Last Report 3. Date incorporated or Qualified 01/26/1995 07/28/1993 Applied For 2a. Mailing Address Not Applicable 59-3201680 21 \$8.75 Additional Suite Apt #, etc Suite, Apt #, etc Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 8. This corporation has liability for intangib<u>le tax under s. 199</u> 032 Country Zio 🗌 Yes 🔲 No Florida Statutes USA 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HANSON, RONALD L !! Street Address (P.O. Box Number is Not Acceptable) 82 8517 SURF DRIVE #202 83 PANAMA CITY BEACH FL 32408 85 Zip Code 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Regulated Agent signature required when reast diag) Stynatize, typed or posted numer of registered agent and title if applicable (3/96) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE 1 1 III LE TITLE CR2E034 1.2 NAME HANSON, RONALD L # NAME 13 STREET ADDRESS 8517 SURF DR., NO. 202 STREET ADDRESS 1.4 CHTY - ST - ZIP PANAMA CITY BEACH FL 32408 Change Addition CITY-ST-ZIP DELETE 2.1 TITLE TITLE 22 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIF CITY-ST-7IP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY-SC-7IP Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 71P CITY-ST-ZIP Change Addition DELETE 5.1 TUILE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CHY-ST-ZIP CITY-S1-ZIP 10000191022/ -08/01/96--01015--022 DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS ***225.00 STREET ADDRESS 6.4 CITY - ST - ZIP applied with this fininglis voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I ed on this annual region or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if director of the appropriation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and the propriate of the analysis of the analysis of the same address. CITY ST-7IP supplied with this film I do hereby certify that the information further certify that the information indice made under oath, that I am an officer am an officer

artachment with an address

NO DEFICER OR DIRECTOR

that my name appears in Block 12 or

GNATURI

SIGNATURE: