SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000053121 (8)

RONDO'S TEN MINUTE OIL CHANGE, INC.

97 OCT -1 AH 10: 58

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Business Mailing Address									T INDUICED LIGHTER HARRE HARRE BOARD BOARD BRAIL BETAR BARRE BOARD HARRE	11161		
1417 CLAY AVE. PANAMA CITY FL 32401 US				2015 THOMAS DR. PANAMA CITY BCH. FL 32408						DO NOT WRITE IN THIS SPACE		
										3. Date Incorporated or Qualified 3a. Date of Last Repor	ŧ	
										07/28/1993 08/01/1996		
2. Principal P	lace of Busi	ness			Mailing Address	Sur		DRIV	0	4. FEI Number Applied		
21	4 -40			26		<u>suk</u>		MAIN			plicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc. 27 Suite 202				<u>.</u>		5. Certificate of Status Desired S8.75 Additional Fee Regulred		
City & State				120 11.00				ach f	L	6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe		
Zip Country						Countr	7 1		8. This corporation owes or has paid the current year Intangil			
24 25				29 5 400 30 US				ر بی		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	NSON, RO											
8517 SURF DRIVE #202						82		eet Address (P.O. Box Number is Not Acceptable)				
PANAMA CITY BEACH FL 32408					1			\[\				
							84	City		85 Zip Code	,	
		,	5572					L		FL '		
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	Signature, typed	or printed name of re	gistered agnint an	id tille i	if appricable (NOTE: Fleg	istered Ag	ent signature re	quired	when reinstating) DATE		
12.		OFFIC	ERS AND D	IREC	10RS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
LITTE	D				☐ DELETE		1.1 TITLE		•	Change	Addition	
NAME	HANSO	n, ronald l	. #			1	1.2 NAME	Ì];	
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CITY-ST-ZIP							6.4 CITY- :	ST-ZIP				

14. I do hereby certify that the information supplied with this filing 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 12 or Block 13 if changed, or on ary attachment with an address.