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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000059045** (3)

QUALITY USED CARS, INC.

FILED Apr 16 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				, , , , , , , , , , , , , , , , , , , ,	**** ***** ***** **		1757 5711 1501
9 EAST 15TH		9 EAST 15TH STREET							
PANAMA CITY FL 32405		PANAMA CITY FL 32405				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifi		OI NOL	
						08/19/1993	0		
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		ΙΔ,	oplied For
21	ade of Business	26				59-3200507			ot Applicable
Suite, Apt. 4	#. etc.	Suite, Apt. #, etc.			-				Additional
22		 -	27			Certificate of Status Desired			equired
City & State		 	City & State			6. Election Campaign Financin	n	\$5.00	May Be
23		<u></u>	28			Trust Fund Contribution	" 🗆		to Fees
Zip	Country	Zip Country				8. This corporation owes or ha	s paid the cu	rrent year Int	tangible
24	25	29	30			Personal Property Tax due J			□ No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New	Registered	Agent	
BENNETT, DERRICK 8					ame				
112 EAST THIRD COURT			}	82 Street Address (P.O. Box Number is Not Acceptable)					
	NAMA CITY FL 32401		or leet Ad			A TO THE PARTY OF	padio		
			83						
				84 Cit			· · · · · ·	les l Zin	Code
		•		84 Cit	ıy		FL	85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.05	502 and 607.1508, Florida Statu	ites, the at	ove-na	med corpo	ration submits this statement for t	he purpose c	f changing i	ts registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was mations of Section 607 0505. F	authorized Iorida Stati	i by the utes	corporatio	n's board of directors. I hereby a	ccept the ap	pointment as	registered
SIGNATURE									
Signature, typed or printed name of registered agent and title d applicable. (NOTE: Registered					nature required	when reinstating) ADDITIONS/CHANGES TO O	DATE	DIDECTOR	20 10 10
12.		ND DIRECTORS DELETÉ	13.	1.5	1	ADDITIONS/CHANGES TO O	FFICERS AN	Change	Addition
TITLE	D BIVINE ID	C) better	1.1 TIT					I ∩ cuande	
NAME	BLYTHE, J D		1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS	2721 FAIRMONT DRIVE				1				
CITY-ST-ZIP	PANAMA CITY FL 32405	DELETE	F.4 CITY-ST-ZIP E 2.1 TITLE		<u></u>			Change	Addition
TALE	•		_					€ organge	LLJ Addition
NAME	BLYTHE, JEAN E			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	2721 FAIRMONT DRIVE				1				
CITY-ST-ZIP	PANAMA CITY FL 32405	☐ DELETE	2. 4 CI 3.1 TIT	TY - ST - ZIF	<u> </u>			Change	Addition
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STREET ADDRESS				REET ADDR	1				
CITY-ST-ZIP TITLE			3.4. GI 4.1 TII	TY-ST-ZIF		···		Change	Addition
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				nme Ree1 addr	Ecc				
STREET ADDRESS					l				
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STREET ADDRESS				ME Reet addr	irec				
i I									
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i .			6.2 NA						
NAME CTRCCT ADDRESS					1500				
STREET ADDRESS				REET ADDR					
CITY-ST-ZIP			5.4 CI	IY-ST-ZIP	<u> </u>				

14. I 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 purpoid, open an attact when it with an address.

LU/Mills COBLIA

-98 RG 78

;R2E034 (10/97)