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 # P93000067873 (8)

FILED Mar 26 1998 8:00am Secretary of State

DAVIS	TUNE INC.				
,	ce of Business	Mailing Address			
5275 N. DAVIS HIGHWAY 3160 ELCANO LANE PENSACOLA FL 32503 CANTONMENT FL 32533					
PENSACULA	rt 36300	CANTONMENT PC 32555		DO NOT WRITE IN TH	S SPACE
]				3. Date Incorporated or Qualified	
				09/29/1993	
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3200506	Not Applicable
h '		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	le le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registers	od Agent
	DE, DONALD E		81 Name		
3160 ELCANO LANE			82 Street Addr	ess (P.O. Box Number Is Not Acceptable)	
GA	ANTONMENT FL 32533		83		
			83		
			84 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607	0502 and 607 1508. Florida Statute	the above-named corn		
office or	registered agent, or both, in the S	tale of Florida, Such change was au	thorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
	am familiar with, and accept the of	bligations of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registere	d agent and lifte if applicable (NOTE:	Registered Agent signature requir	red when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PS	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ROE, DONALD E		1.2 NAME		;
STREET ADDRESS	3160 ELCANO LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CANTONMENT FL		1.4 CITY - ST - ZIP		
TITLE	OOF OURSELS	L DELETE	21 TITLE		Change Addition
NAME	ROE, SHIRLEY F 3160 ELCANO LANE		2.2 NAME	**	
STREET ADDRESS	CANTONMENT FL		2.3 STREET ADDRESS		
CITY-ST-ZIP	CANTONWENT FE	☐ DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE			3.1 TITLE		☐ rusude ☐ wodu(ou
NAME STREET ADDRESS	\		3.2 NAME 3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3.3 STREET AUDRESS 3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	, , , , , , , , , , , , , , , , , , ,	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		Ì
CITY - ST - ZIP			64 CITY-ST-ZIP		j

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 changed, or on an attachment with an address.

SIGNATURE:

75 R. DOLGU

3/14/98

(350) 474 3000