

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayman
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

95 MAY -1 PM 1:55

DOCUMENT # P93000075276 (4)

1. Corporation Name:

AXIS AUTO SALES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16270 OLD US HWY 41 S
A 6-7
FT MYERS FL 33912

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A 6-7
FT MYERS FL 33912

DO NOT WRITE IN THIS SPACE

3. Date the corporation is qualified	3a. Date of Last Report
10/25/1993	05/01/1994
4. FET Number	Applied For Not Applicable
APPLIED FOR 65-0506859	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
7. This corporation has liability for franchise tax under the Florida Statutes	☐ Yes ☒ No

21. Previous Filing of Documents	2a. Mailing Address
1931 Custom Dr	1931 Custom Dr
22. City, State	27. City, State
FT MYERS FL	FT MYERS FL
24. 33907	25. U.S.
29. 33907	30. U.S.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MCGRATH, DONALD E 9455 CYPRESS LAKE DR FT MYERS FL 33919	81. Name 82. Street Address (P.O. Box Numbers Not Acceptable) 83. 84. City 85. Zip Code

11. Pursuant to the provisions of Sections 601, 602, and 603, 1908, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in 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 the Secretary of State, Florida Statutes.

Signature of Registered Agent: _____ Date: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS, DIRECTORS, AND REGISTERED AGENTS
1. NAME PVT MCGRATH, DONALD E 9455 CYPRESS LAKE DR FT MYERS FL 33919	1. NAME ☐ Change ☐ Addition
2. NAME S TRIMMER, CLETUS R JR. 8088 HARRISBURG DR FT MYERS FL 33912	2. NAME ☐ Change ☐ Addition
3. NAME ☐ Change ☐ Addition	3. NAME ☐ Change ☐ Addition
4. NAME ☐ Change ☐ Addition	4. NAME ☐ Change ☐ Addition
5. NAME ☐ Change ☐ Addition	5. NAME ☐ Change ☐ Addition
6. NAME ☐ Change ☐ Addition	6. NAME ☐ Change ☐ Addition
7. NAME ☐ Change ☐ Addition	7. NAME ☐ Change ☐ Addition
8. NAME ☐ Change ☐ Addition	8. NAME ☐ Change ☐ Addition
9. NAME ☐ Change ☐ Addition	9. NAME ☐ Change ☐ Addition
10. NAME ☐ Change ☐ Addition	10. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and shows that I am qualified to be the registered agent under the Florida Statutes. I further certify that the information furnished on this filing is true and correct and that the corporation has authorized me to make the same legal office. I am a resident of the State of Florida and I am a resident of the State of Florida and I am a resident of the State of Florida and I am a resident of the State of Florida.

SIGNATURE: _____
SIGNATURE AND TYPE OF PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4/27/95 (813) 939-1953