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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 P93000085236 (6) DOCUMENT #

WEST PALM BEACH CHEVRON, INC.

TO AND REPORT OF THE PROPERTY OF THE STATE OF THE STATE OF THE SERVICE OF THE STATE OF THE STATE

FILED

Feb 10 1998 8:00am

Secretary of State

					!		
Principal Place of Business Mailing Address							
2615 S DIXIE		2615 S DIXIE HWY					
WEST PALM BEACH FL 33401		WEST PALM BEACH FL 33401			DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified		
					12/14/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0457954		Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	h		5. Certificate of Status Desired		Additional
22		27			Fee Required		
City & State		City & State	}¬ '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		28 Z ₍₁₎	Zip Country		· · · · · · · · · · · · · · · · · · ·		
24	}1	25 29 30		,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	g, Name and Address of Curre		1001		10. Name and Address of New R		
ME	SSINEO, JOSEPH M		81	Name			
	15 S DIXIE HWY		82	Street Add	ress (P.O. Box Number is Not Accepta	ble)	
	EST PALM BEACH FL 33401				Toda (F. C. Box Hamber is Het Accepted		
			83	·			
			84	City		FL 85 Zip	Code
44 Purcuant	to the provisions of Sections 607.05	02 and 607 1508 Florida State	ites the abou	e-named cor	poration submits this statement for the		its registered
office or r	registered agent, or both, in the Sta	le of Florida Such change was	authorized b	y the corpora	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment a	s registered
	ин талтшаг with, ало ассерт тегоол	gauens or, section our trada, i	TOTICA STATUTE	· 5.			
SIGNATURE	Signature, typed or printed name of the instered a	gent and the diapple able (NO) II. Registered Ag	eni signature requ	ired when reinstating)	DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	MESSINEO, JOSEPH M		1.2 NAME				
STREET ADDRESS	1707 VILLAGE BLV #107			T ADDRESS			
CITY-ST-ZIP	PALM BEACH FL	Drutt	1.4 CITY-	ST-ZIP		Change	Addition
TITLE		DELETE	2.1 TITLE			☐ Change	L ADDITION
NAME			2.2 NAME				-
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	2 4 CITY- 3 1 TITLE	ST-ZIP		Change	Addition
NAME			32 NAME				
STREET ADDRESS				T ADDRESS			
			3.4. CITY-				+
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	01-10		Change	Addition
NAME		-	4 2 NAME			v	
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP			4.4 CITY-				
TITLE		DELETE	5 1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADORESS			
CITY - ST - ZIP			5.4 CITY-	1			
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP	1		6.4 CITY	ST-ZIP			

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 of the project 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 changes in only afternming with an address.

SIGNATURE: