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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

P93000088065 (6)

Mailing Address

BAY TUNE UP, INC.

1214 AIRPORT MOAD PANAMA CITY FL 32405 US		213 W. 33RD PLACE Panama City FL 32405 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1994		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	-	oplied For
21		26				59-3215405		ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional aquired
City & State	0	City & State				Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country			Country		8. This corporation owes or has paid the cu		
24			30		Personal Property Tax due June 30. Yes No			
<u></u>	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent	
	JMMAGE, DAVID M		1	81	Name			
213 W. 33RD PLACE PANAMA CITY FL 32405					Street Addre	ess (P.O. Box Number is Not Acceptable)		
			[1	83			-	
:			ŀ	B4	City		85 Zip	Code
SIGNATURE	Signature, typed or printed name of registored age		TE: Registered	Agen	nt signature required	d when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	D OF TOURISME	DELETE	1,1 1111	F	Т	ADDITIONS/OFFANGES TO OFFICE AN	Change	Addition
NAME	RUMMAGE, DAVID M		1.2 NAM					
STREET ADDRESS	213 W. 33RD PLACE				ADDRESS			
CITY-ST-ZIP PANAMA CITY FL			1.4 CITY - ST - ZIP					
TITLE	ST DEL			2.1 TITLE			☐ Change	Addition
NAME	RUMMAGE, PATRICIA A		2.2 NAN	ΛE				
STREET ADDRESS	213 W. 33RD PLACE		2.3 STR	EET A	address			
CITY-ST-ZIP			2. 4 CIT	Y - ST	I-ZiP			
TITLE		☐ DELETE	3.1 TITL	.E			Change	Addition
NAME			3.2 NAM	AE.				
STREET ADDRESS			3.3 STR	EET A	ADDRESS			
CITY-ST-ZIP			3.4. CIT		r-zip	. = .		
TITLE		L DELETE	4.1 TiTL	.E			Change	☐ Addition
NAME			4. 2 NA	ME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			4.4 C(T)		- ZIP	<u> </u>		1 X X 200
TITLE		☐ DELE te	5.1 TITL				∐ Change	Addition
NAME			5.2 NAM	Æ				

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 angular 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 13 if changed, or on an alternation with an address.

5.3 STREET ADORESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

1) 1. (22) 11- 226

☐ Change

Addition

FILED

Apr 27 1998 8:00am

Secretary of State