

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 6:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000086035 (0)

1. Corporation Name

WHOLESALE AUTOMOTIVE INC.

Principal Place of Business

Mailing Address

18406 STERLING SILVER CIRCLE
LUTZ FL 33549

18406 STERLING SILVER CIRCLE
LUTZ FL 33549

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59 3282679

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JULIAN, MIKE
18406 STERLING SILVER CIRCLE
LUTZ FL 33549

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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, Section 607.0505, Florida Statutes.

SIGNATURE

MICHAEL JULIAN

Signature (Typed or Printed Name of Signature Agent and Date of Application)

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PRESIDENT

NAME

MICHAEL JULIAN

STREET ADDRESS

18406 STERLING SILVER CIRCLE

CITY ST ZIP

LUTZ FL 33549

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

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STREET ADDRESS

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CITY ST ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY ST ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY ST ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY ST ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY ST ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY ST ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY ST ZIP

☐ Change ☐ Addition

100001521641

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****200.00 ****200.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

MICHAEL JULIAN

MIKE JULIAN

4-20-95

813 546 3583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

Signature (Typed or Printed Name)