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CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAR 31 AM 11:35

DOCUMENT # **P94000019251 (5)**

1. Corporation Name

**GAMMINO MOTORS, INC.**

Principal Place of Business

**NUMBER 300 HIGHWAY 27 NORTH  
DUNDEE FL**

Mailing Address

**NUMBER 300 HIGHWAY 27 NORTH  
DUNDEE FL**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

**03/08/1994**

4. FEI Number

Applied For

**59-3226727**

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

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

2. Principal Place of Business

2a. Mailing Address

**21 2003 DUNDEE RD.**

**26 P O BOX 1047**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

**23 WINTER HAVEN FL.**

**28 DUNDEE FL.**

Zip

Country

Zip

Country

**24 33884**

**25 POLK**

**29 33838**

**30 POLK**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GAMMINO, JOSEPH JR.  
216 MOUSE MOUNTAIN DRIVE  
DAVENPORT FL 33837**

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

Signature, typed or printed name of registered agent, and date of signature

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
**D  
GAMMINO, JOSEPH JR.  
216 MOUSE MOUNTAIN DRIVE  
DAVENPORT FL 33837**

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

TITLE

21 TITLE

NAME

22 NAME

STREET ADDRESS

23 STREET ADDRESS

CITY ST ZIP

24 CITY ST ZIP

TITLE

31 TITLE

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY ST ZIP

34 CITY ST ZIP

TITLE

41 TITLE

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY ST ZIP

44 CITY ST ZIP

TITLE

51 TITLE

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY ST ZIP

54 CITY ST ZIP

TITLE

61 TITLE

NAME

62 NAME

STREET ADDRESS

63 STREET ADDRESS

CITY ST ZIP

64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: **Joseph Gammino Jr.**

**3/28/95**

**813-299-5767**

Typed and printed name of signing officer or director