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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025143 (6)

NORTH NAPLES TIRE & AUTO CENTER, INC.

Principal Place of Business Mailing Address 2322 ARBOUR WALK CIRCLE 2322 ARBOUR WALK CIRCLE APT, 1126 APT, 1126 NAPLES FL 34109-6867 NAPLES FL 33942 3. Date Incorporated or Qualified 3a. Date of Last Fleport 03/31/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0478707 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees ZID Country Ζip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes X Yes No 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HOFFMAN, HOWARD L 2322 ARBOUR WALK CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) APT. 1126 83 NAPLES FL 33942 84 City Zip Code 85 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, typod or printed name of registered agent and title if applicable (NO1E: Registored Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 13. DELETE 1.1 1014 Change Addition TITLE ARDITI, ANTHONY J NAME 1.9 NAME 3525 CONNER ST. STREET ADDRESS 1.3 STREET ADDRESS THE BRONX NY 10475 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELFTE Change Addition TITLE 2.1 TITLE ARDITI, ANTHONY G 2.2 NAME 3525 CONNER ST. STREET ADDRESS 2.3 STREET ADDRESS THE BRONX NY 10475 CITY-ST-ZIP 2. 4 CITY - ST - ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE HOFFMAN, HOWARD L NAME 3.2 NAME 2322 ARBOUR WALK CIRCLE, APT, 1126 STREET ADDRESS 3.3 STREET ADDRESS NAPLES FL 33942 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THUE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-\$1-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME

14. I do 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 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 17 it changed, or or on an address.

6.3 STREET ADDRESS

6.4 CHY-S1-ZIP