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May 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000025549 (4)

1. Corporation Name

MIKE EVANS CARS & TRUCKS, INC.

Principal Place of Business

Mailing Address

3994 S. LAKE ORL. PKWY
ORLANDO FL 32808
US

3994 S. LK. ORL. PKWY
ORLANDO FL 32808-3008
US



3. Date Incorporated or Qualified

03/31/1994

3a. Date of Last Report

05/16/1996

4. FEI Number

59-3230656

Applied For

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLISLE, RONALD W
2731 SILVER STAR ROAD
ORLANDO FL 32808-3935

ADDRESS
CHANGE
ONLY

81 Name

CARLISLE, RONALD W.

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

5840 N. ORANGE BLOSSOM TR.

83

256

84 City

ORLANDO

FL

85 Zip Code

32810

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD
EVANS, MICHAEL
STREET ADDRESS 3994 S. LAKE ORLANDO PKWY
CITY-ST-ZIP ORLANDO FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME VD
EVANS, ANNA M
STREET ADDRESS 3994 S. LAKE ORLANDO PKWY
CITY-ST-ZIP ORLANDO FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME SD
EVANS, MICHAEL
STREET ADDRESS 3994 S. LAKE ORLANDO PKWY.
CITY-ST-ZIP ORLANDO FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Evans

MICHAEL EVANS

5/16/97

4072906264

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

000000

CR2E034 (9/96)