

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90019 046 ***158.75

DOCUMENT # P94000031473

Corporation Name

DMV, Inc.

Principal Place of Business

418 HARBOR VIEW LANE
LARGO, FL. 33770

Mailing Address

418 HARBOR VIEW LANE
LARGO, FL. 33770

DO NOT WRITE IN THIS SPACE

Principal Place of Business

418 HARBOR VIEW LANE

2a. Mailing Address

418 HARBOR VIEW LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LARGO, FL.

City & State

LARGO, FL.

Zip

33770

Country

USA

Zip

33770

Country

USA

3. Date Incorporated or Qualified

4/26/94

4. FEI Number

72-1044967

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

X Yes

□ No

9. Name and Address of Current Registered Agent

TOUPS, LEON H.
418 HARBOR VIEW LANE
LARGO, FL. 33770

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

1. 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

LEON H. TOUPS

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

Leon H. Toup

4/25/99

2. OFFICERS AND DIRECTORS

1. NAME

D PRES.
TOUPS, LEON H.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

2. NAME

VPD
TOUPS, MICHAEL P.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

3. NAME

VPD
TOUPS, MICHAEL P.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

4. NAME

VPD
TOUPS, MICHAEL P.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

5. NAME

VPD
TOUPS, MICHAEL P.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

6. NAME

VPD
TOUPS, MICHAEL P.
418 HARBOR VIEW LANE
LARGO, FL. 33770

□ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

□ Change

□ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

□ Change

□ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

□ Change

□ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

□ Change

□ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

□ Change

□ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

□ Change

□ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

Leon H. Toup

LEON H. TOUPS

4/25/99

727-~~548~~

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)