(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P94000068193 (9)

1. Corporation Name
INTERSTATE AUTO SALES, INC.

Principal Place of Business
~~4450 GULF BLVD., UNIT 316~~
ST. PETERSBURG FL 33706

Mailing Address
INTERSTATE AUTO SALES, INC.
~~4450 GULF BLVD., UNIT 316~~
2324 Central Avenue
ST. PETERSBURG FL 33706
St. Petersburg, FL 33712

DO NOT WRITE IN THIS SPACE

a. Date Incorporated or Qualified: 09/13/1994
3b. Date of Last Report: NEW

2. Principal Place of Business
2324 Central Ave
Suite, Apt. #, etc.
22
23 City & State: St. Petersburg, Fl
24 Zip: 33712
25 County: Pinellas

2a. Mailing Address
26 2324 Central Ave
Suite, Apt. #, etc.
27
28 City & State: St. Petersburg, Fl
29 Zip: 33712
30 Country: Pinellas

4. FEI Number: 59-7031980 [ ] 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. [X] Yes [ ] No

9. Name and Address of Current Registered Agent
SHEPPEY, BRENT T
~~4450 GULF BLVD., UNIT 316~~ 14 CRESCENT PLACE S.
ST. PETERSBURG FL ~~33706~~ 33711
HOME

10. Name and Address of New Registered Agent
81 Name: Sheppey, Brent T.
82 Street Address (P.O. Box Number is Not Acceptable): 2324 Central Avenue
83
84 City: St Petersburg FL 85 Zip Code: 33712

11. Pursuant to the provisions of Section 607.0505 and/or 607.1008, 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 is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper performance of my duties, and I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Registered Agent signature required when resigning) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT-SECRETARY-TREASURER
NAME	BRENT TYLER SHEPPEY
STREET ADDRESS	14 CRESCENT PLACE SOUTH.
CITY-ST-ZIP	ST. PETERSBURG FL. 33711
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

11 TITLE	[ ] Change [ ] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	[ ] Change [ ] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[ ] Change [ ] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[ ] Change [ ] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[ ] Change [ ] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[ ] Change [ ] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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 a 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 is added in Block 13 with an address.

SIGNATURE: Brent T. Sheppey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BRENT T. SHEPPEY

March 15/95
Date

(813) 323-3393
Daytime Phone

0007293 CP