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FILED  
Jan 25, 1999 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999



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

01-25-1999 90059 026 \*\*\*150.00

DOCUMENT # P94000077184

1. Corporation Name  
OLD CUTLER SERVICE STATION, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
% JOHN KATSOU LIS  
20245 FRANJO ROAD  
MIAMI FL 33189  
US

Mailing Address  
% JOHN KATSOU LIS  
20245 FRANJO ROAD  
MIAMI FL 33189

3. Date Incorporated or Qualified  
10/19/1994  
4. FEI Number  
65-0539738  
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 owes the current year Intangible Personal Property Tax. [ ] Yes [ ] No

2. Principal Place of Business  
21 [ ] Suite, Apt. #, etc.  
22 [ ] City & State  
23 [ ] Zip [ ] Country  
24 [ ] 25 [ ]  
2a. Mailing Address  
26 [ ] Suite, Apt. #, etc.  
27 [ ] City & State  
28 [ ] Zip [ ] Country  
29 [ ] 30 [ ]

9. Name and Address of Current Registered Agent  
KATSOU LIS, JOHN  
20245 FRANJO ROAD  
MIAMI FL 33189

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

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE [ ] DELETE  
NAME D KATSOU LIS, JOHN  
STREET ADDRESS 20245 FRANJO ROAD  
CITY-ST-ZIP MIAMI FL 33189  
TITLE [ ] DELETE  
NAME D KATSOU LIS, GEORGE  
STREET ADDRESS 20245 FRANJO ROAD  
CITY-ST-ZIP MIAMI FL 33189  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

14. 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: \_\_\_\_\_ DATE: 1/4/99 DAYTIME PHONE # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)