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May 06, 1999 8:00 am
Secretary of State

05-06-1999 90064 026 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000080318

1. Corporation Name

HARBOR AUTO SALES, INC.

Principal Place of Business
4914 US HWY 19 N
NEW PORT RICHEY FL 34652

Mailing Address
4914 US HWY 19 N
NEW PORT RICHEY FL 34652

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

10/25/1994

4. FEI Number

59-3278028

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 owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

TIMMER, DANNY K
4914 US HWY 19 N
NEW PORT RICHEY FL 34652

10. Name and Address of New Registered Agent

81 Name Wayne Giese

82 Street Address (P.O. Box Number is Not Acceptable)
4914 US Hwy 19 North

83

84 City New Port Richey FL

85 Zip Code 34652

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

Wayne Giese

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-99

12. OFFICERS AND DIRECTORS

TITLE PT
NAME TIMMER, DANNY K
STREET ADDRESS 4941 S SHORE DR
CITY-ST-ZIP NEW PORT RICHEY FL

DELETE

TITLE SVP
NAME TIMMER, JOANN C
STREET ADDRESS 4941 S SHORE DR
CITY-ST-ZIP NEW PORT RICHEY FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Tony Grigoris
1.3 STREET ADDRESS 1516 Alex St.
1.4 CITY-ST-ZIP Holiday, FL 34690

Change Addition

2.1 TITLE Vice President
2.2 NAME Wayne Giese
2.3 STREET ADDRESS 3350 Cypress Pond Rd, Apt 1705
2.4 CITY-ST-ZIP Palm Harbor, FL 34684

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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:

Wayne Giese
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-99 727-849-9576

CR2E034 (11/98)