

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000093557 (4)

1. Corporation Name

CLASSIC AUTO INTERIORS & ACCESSORIES, INC.

Principal Place of Business

4901 N ARMENIA AVENUE
TAMPA FL 33603
US

Mailing Address

4901 N ARMENIA AVENUE
TAMPA FL 33603
US

FILED

97 SEP -4 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1994

3a. Date of Last Report

03/18/1996

4. FEI Number

59-3289278

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ 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

FRITZ, JOSEPH R
4204 N NEBRASKA AVENUE
TAMPA FL 33603

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
STREET ADDRESS FRITZ, JOSEPH R
CITY-ST-ZIP 4204 N NEBRASKA AVENUE
TAMPA FL 33603

TITLE ☒ DELETE

NAME POST
STREET ADDRESS WHITE, JOYCE A
CITY-ST-ZIP 4901 NORTH ARMENIA AVENUE
TAMPA FL

TITLE ☒ DELETE

NAME VP
STREET ADDRESS HICKMAN, JOYCE A
CITY-ST-ZIP 4901 NORTH ARMENIA AVENUE
TAMPA FL 33603

TITLE ☐ DELETE

NAME D
STREET ADDRESS CHAVARRIA, MERY JO
CITY-ST-ZIP 4204 NORTH NEBRASKA AVENUE
TAMPA FL 33603

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7000002287357-7
-09/08/97--01129--002
****165.00 ****165.00

President
Annie Jackson
4901 N. Armenia Ave.
Tampa, FL 33603

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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, changed, or on an attachment with an address.

CF2E034 (4/97)

Classic Auto Interiors & Accessories

4901 N. ARMENIA AVE. TAMPA, FLORIDA, 33603 • PHONE (813) 875-8055

8-28-97

Our first report was mailed
4-11-97 with a check for \$165.00 ck. #35782.
It has not cleared our bank so we
are putting a stop payment on it.
We are sending a replacement check
for \$165.00 ck. #36839. (Copy of ck. stub enclosed)
If there is a problem please feel
free to contact me @ 813 875-8055.

Thank you
Aunie Jackson