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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

Off Y-ST ZIP

STREET ADDRESS

SIGNATURE:

DITY - \$1 - 767

THE NAM:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000039381 (5)

COASTAL WHOLESALE CARS, INC.

145 EAST BURGESS ROAD 145 EAST BURGESS ROAD PENSACOLA FL 32503-7244 PENSACOLA FL 32504 3. Date Incorporated or Qualified 3a. Date of Last Report 05/17/1995 05/01/1996 2. Principal Pasce of Business 2a. Mailing Address 4. FEI Number Applied For 59-3315978 Not Applicable 21 26 Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Ζıp Country 8. This corporation has liability for intangible tax under s. 199,032, Zιρ 25 30 Florida Statutes Yes No 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RENTZ, FAYE B 145 EAST BURGESS ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PENSACOLA FL 32504 83 84 City 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. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE ngon in a typed or parties name of registerest agent and the if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition 1 D.E RENTZ, FAYE B 1.2 NAME R2E034 MALIF 3750 BAYNWELL CIRCLE 1.3 STREET ADDRESS STREET ADORESS. PENSACOLA FL 32503 1.4 CITY - ST - ZIP CHI+ST ZIP Addition DELETE 2 1 TITLE ☐ Change TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE THEF 3.2 NAME MAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY ST ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME: 4.3 STREET ADDRÉSS STREET ADDRESS. 4.4 CITY-ST-ZIP CITY - \$1 - 70° Addition DELETE ☐ Change Till-E 5.1 TITLE 5.2 NAME NAMI 5.3 STREET ADDRESS STREET ADORESS

5.4 CITY - ST - ZIP

6.4 City-ST-ZIP

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 eath; that I am air 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.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

FILED Jan 27 1997 8:00am Secretary of State



Change

0484564

Jan. 20,1997 Daytere France

Addition