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PROFIT CORPORATION ANNUAL REPORT

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STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000056202 (1)

WILLETTE AUTOMOTIVE, INC.

Principal Place of Business Mailing Address 207 S. TAMIAMI TRAIL 207 S. TAMIAMI TRAIL VENICE FL 34285 VENICE FL 34285 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0600663 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ř١ Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 84 City 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 little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE WILLETTE, BRIAN 1.2 NAME NAME 207 S. TAMIAMI TRAIL STREET ADDRESS 1.3 STREET ADDRESS VENICE FL 34285 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME WILLETTE, KAREN 2.2 NAME 207 S. TAMIAMI TRAIL STREET ADDRESS 2.3 STREET ADDRESS **VENICE FL 34285** CITY-\$7-21P 2. 4 CITY - ST-ZIP DELETE Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETÉ Addition TITLE 6.1 TITLE

14. Thereby certify that the information supplied with this filling 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.

SIGNATURE:

Sum J. Willette Burn J. Willette 4/8/98 (94)4/86/8894

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP