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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	NNUAL REPORT  1998  Secretary of State Division of Corporations		Secretary of State		
	IMENT # P95000 NING QUICK LUBE, INC.	0056650 (1)		) 	NYI DEBBI BUWA BUWA BUWA BUWI BAWI DAW
Principal Place of Business 6709 SR 54 NEWPORT RICHEY FL 34653 US		Mailing Address 6709 SR 54 STE 4423 NEWPORT RICHEY FL 34653 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				07/21/1995	
2. Principal	Principal Place of Business  2a. Mailing Address  2b. 4709 St 54			4. FEI Number 59-3328717	Applied For Not Applicable
Suite, Apt	t #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 NONE			Fee Hequired
City & Str	ato	City & State 28 NEW PORT R	CACY	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	710	Country	This corporation owes or has particular to the particular to	
24	25	[29] 34453 [30	<u>]</u>	Personal Property Tax due June	
1.4	9. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
MODAL AMBOR					
7000 DAHCLAT NU   82   STE-4423-			82 Street Add	ress (P.O. Box Number is Not Acceptal	Ole)
NEWPORT RICHEY FL 34654			83		
			84 City		85 Zip Code
11 Durayan	tte Marguisians of Southern COZ DEC	12 and 602 \$1.00 Florida Statutos	the about parced corr	position guilboits this atstampal for the	<b>FL</b>   i i
office or	registered agent, or brutt, in the State	of Florida, Such change was aut	norized by the corpora	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment as registered
l	W// 1/ N/ 1/	anons or, soction 607.0505, Floric	X C. CC	MOVAY	YIVAR
SIGNATURE	Signature, typed or printed non-niol required again		egistered Agent signature requi	ired when reinstating)	DATE
12.		DIRECTORS V	13.	ADDITIONS/CHANGES TO OFFI	
TITLE NAME	PD MCKAY, JAMES F	DELETE	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	TARE BAROLAN DR		1.3 STREET ADDRESS		
CITY ST-7IP	NEWPORT RICHEY FL		1.4 CITY - ST - ZIP		1
TITLE	VSTD	DELETE	21 TITLE		☐ Change ☐ Addition
NAME	MCKAY, DENISE D		2.2 NAME		1
STREET ADDRESS			2.3 STREET ADDRESS		ļ
City-St-ZiP	NEWPORT RICHEY FL	☐ DELETE	2.4 CITY - ST - ZIP		Change Addition
TITLE NAME		LJ DICCIL	3.1 TITLE 3.2 NAME		Li viiaige Li Audilloii
STREET ADDRESS			3.3 STREET ADDRESS		
City - St - 7iP			3.4. CITY - ST - ZIP		
TIFLE		☐ DELE1E	4.1 TITLE		Change Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 City-ST-ZiP 5.1 Title		Change Addition
NAME		and seems	5.2 NAME		المرابعة الم
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		DILETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP	1		6.4 City - St - 7IP		

14. Thereby 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 period or suppliemental 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 charged, or on an attachment with an address.

SIGNATURE:

\*\*Comparison\*\*

\*\*Democratical Statutes\*\*

\*\*De

**FILED** 

Apr 23 1998 8:00am