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

**PROFIT** CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000059510 (4)

CAR ENTERPRISES, INC.

Principal Place of Business	Mailing Address
P.O. BOX 906 VERO BEACH FL 32961	P.O. BOX 906 VERO BEACH FL 32961

## **FILED** May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			( seelings un state deut batte batte distr destr destr	Britis Laini airbi vinit Anti (884			
		P.O. BOX 906 VERO BEACH FL 32961			DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualified	10 0/ / 102	
					07/31/1995		
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26	26		59-3336164	Not Applicable	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.	. <del>*</del>			\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & Sta	ate	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zιp	Country		8. This corporation owes or has paid the		
24	25 9, Name and Address of Current		30		Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No	
	<del> </del>	t negistered Agent	6	Name	10. Name and Address of New negisters	o Agent	
	EGG, ROBERT L		_				
	428 21ST STREE ERO BEACH FL		6:	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
٧	ENO BEACH FL		8:	3	<del></del>		
			84	1 City		■ 85 Zip Code	
				1	F		
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							
12.	Signature, typed or printed name of registered ager OFFICERS AND		13.	geni signature re	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	DELETE	1.1 TITLE	····	ADDITIONA/OFFANGES TO OFFICERS A	Change Addition	
NAME	SHURTLEFF, RAYMOND P		1.2 NAME				
STREET ADDRESS	A 45 A 555 11 5 A144			T ADDRESS		[	
CITY-ST-ZIP	VERO BEACH FL 32968		1.4 CiTY-	į.		ן ק	
TITLE	D	☐ DELETE	2 1 TITLE			☐ Change ☐ Addition	
NAME	SHURTLEFF, CHERYL R		2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP	VERO BEACH FL 32988		2. 4 CITY	-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition	
NAME	1		3.2 NAME				
STREET ADDRESS	1		3 3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAMI	1		<b>†</b>	
STREET ADDRESS			1	T ADORESS		1	
CITY-ST-ZIP		Dever	44 CITY-	ST-ZIP			
TITLE		☐ DELETE	5 1 TITLE			Change Addition	
NAME			5 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY-	ST-ZIP		Change	
TITLE	1	L_J DELETE	6 1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	<u> </u>		64 CITY-	ST-ZIP			

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 report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 affecting the state of the same legal effect as if made under eath; 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 affecting the same legal effect as if made under each trustee.

(561)562-7532