

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

FILED

Feb 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortimer Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000067488 (3) 1. Corporation Name MEYERS AUTO WHOLESALE, INC.			
Principal Place of Business 2913 E 15TH ST PANAMA CITY FL 32405 US		Mailing Address PO BOX 1153 LYNN HAVEN FL 32405 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 2913 E 15TH ST	
22 City & State		27 PANAMA CITY	
23 Zip		28 32405	
24 Country		29 US	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MEYERS, DAVID P 2913 E 15TH ST PANAMA CITY FL 32405		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
PSTD MEYERS, DAVID P 403 EAST 23RD STREET PANAMA CITY FL 32405		PSTD MEYERS, DAVID P 2913 E 15TH ST PANAMA CITY FL 32405	
2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
14. I 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 if changed, or on an attachment with an address.			
SIGNATURE: David P Meyers DAVID P MEYERS 1-12-98 (850) 872-8882			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/28/1995	
4. FEI Number 59-3333319	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

CR2E034 (10/97)