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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000074242 (5)

EXECUTIVE TIRE & AUTOMOTIVE CENTER, INC.

Principal Place of Business	Mailing Address
855 BALD EAGLE DR MARCO ISLAND FL 33937	PO BOX 2468 MARCO ISLAND FL 34146-2468

## FILED Apr 14 1997 8:00am Secretary of State



855 BALD EAGI MAROO ISLAND	LE DR ) FL 33937	PO BOX 2468 MARCO ISLAND FL 34146	PO BOX 2468 MARCO ISLAND FL 34146-2468					
					3. Date Incorporated or Qualified 09/26/1995	3a. Date of L 05/01/19		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
21		26			65-0607752		Not Applicable	
Sulte, Apt. #, etc.		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State City & State				Election Campaign Financing     Trust Fund Contribution		5.00 May Be dded to Fees	
Zip <b>24</b>	Country 25	Z(p <b>29</b>	30 Cour	itry		Yes 🗌 No	der s. 199.032,	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Reg	distered Agent		
1400 SUIT	BER, DAVID M OGULFSHORE BLVD E 123 LES FL 33940		-	82 Street Add 42' 83 City.	AVIN M CRUBER Address (P.O. Box Number is Not Acceptable) 226-3 FOWLER STREET  T MYENS  FL 85 7ip Code 33901			
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, 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 a princetile. (NOT) Registered Agent signature required when relinstating)  DATE								
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	CTORS IN 12	
TITLE	P	☐ DELFTE	1.1 10	LF .		Ch	ange 🔲 Addition 🛭	
NAME	GRUBER, DEWAYNE JR.		1.2 NA	ΝÉ				
STREET ADDRESS	ET ADDRESS 968 BARFIELD 1.3		1.3 ST	RECT ADDRESS			ļ	
CITY-ST-ZIP	MARCO ISLAND FL 33937		1.4 CII	Y-\$1-ZIP				
TITLE		DELETE	2.1 111	LE		L Ch	ange L Addition C	
NAME			2.2 NA	V/E				
STREET ADDRESS			2.3 \$1	REET ADDRESS				
CITY-ST-ZIP		D Sector		IY-S1-ZIP				
TITLE		☐ DELLTE	3.1 1/1			L.) Ch	ange L Addition	
NAME			3.2 NA				ļ	
STREET ADDRESS			1	REET ADDRESS				
CITY-ST-ZIP		DELETE	4.1 DI	Y-\$1-ZIP		Ch	ange Addition	
		built	4.1 (1)	i i		VIII		
NAME PIRET ADDOCCO				KEET ADDRESS				
STREET ADDRESS				Y-S1-7IP				
CITY-ST-ZIP TITLE		DELETE	5.1 1)1			☐ Ch	ange Addition	
NAME			5.2 NA	1				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				Y-\$1-2IP				
TITLE		DELETE	6.1 111			☐ Ch	ange Addition	
NAME		<del></del>	6.2 NA			_		
STREET ADDRESS				REET ADDRESS				
CITY-SI-ZIP				Y - S1 - ZIP				

. To 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 an officer or director of the certification or the recovery or trusted empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name