

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000082600 (4)

1. Corporation Name

GOOD WHEELS AUTO SALES, INC.



Principal Place of Business

3515 VILLAGE BLVD  
BLDG #3 APT #303  
WEST PALM BEACH FL 33409

Mailing Address

3515 VILLAGE BLVD  
BLDG #3 APT #303  
WEST PALM BEACH FL 33409

3. Date Incorporated or Qualified  
10/26/1995

3a. Date of Last Report  
N/A

2. Principal Place of Business

2a. Mailing Address

21 12483 67TH STREET NORTH

26 12483 67TH STREET NORTH

4. FEI Number  
65-0621451

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 WEST PALM BEACH, FL

28 WEST PALM BEACH, FL

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

24 33412

25 PALM BEACH

29 33412

30 PALM BEACH

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MONTOZZI, MARK  
3515 VILLAGE BLVD  
BLDG #3 APT #303  
WEST PALM BEACH FL 33409

81 Name  
MARK E. MONTOZZI

82 Street Address (P.O. Box Number is Not Acceptable)  
12483 67TH STREET NORTH

83

84 City  
WEST PALM BEACH, FL

85 Zip Code  
33412

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

Mark E. Montozzi

Mark E. Montozzi

4-23-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME MONTOZZI, MARK  
STREET ADDRESS 1256 OLD PITTSBURGH RD  
CITY-ST-ZIP WAMPUM PA 16157

1.1 TITLE D/P  
1.2 NAME MARK E. MONTOZZI  
1.3 STREET ADDRESS 12483 67TH STREET NORTH  
1.4 CITY-ST-ZIP WEST PALM BEACH, FL 33412

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Mark E. Montozzi

Mark E. Montozzi

4-23-96

412-752-9807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)