

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000088446 (6)
1. Corporation Name

TOTAL AUTO CARE OF TAMPA, INC.



Principal Place of Business

Mailing Address

2415 S RAMONA CIRCLE
TAMPA FL 33612

2415 S RAMONA CIRCLE
TAMPA FL 33612

3. Date Incorporated or Qualified
11/16/1995

3a. Date of Last Report

N/A

4. FEI Number

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21 2701 N. ARMENIA AV.

26 SAME AS #2

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 TAMPA, FLORIDA

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24 33607

25 Hillsborough

29

30

9. Name and Address of Current Registered Agent

HAMILTON, JOSEPH
2415 S RAMONA CIRCLE
TAMPA FL 33612

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 reappointing)

DATE

12. PRESIDENT OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME JOSEPH R. HAMILTON

STREET ADDRESS 2415 S. RAMONA CIRCLE

CITY - ST - ZIP TAMPA, FL

33612

TITLE ☐ DELETE

NAME SECRETARY & TREAS.

STREET ADDRESS JEFFREY D. HAMILTON

CITY - ST - ZIP 1803 E. NAVAJO AVE.

TAMPA, FL. 33612

TITLE ☐ DELETE

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