TILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT COBPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B≠Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 27 1997 8:00am Secretary of State

DOCUMENT # P95000091960 (1)

EIGHTY-EIGHT AUTO SUPPLY, NO.3, INC.

Principal Place	e of Business	Mailing Address			1
954 PINE ISLAND ROAD		954 PINE ISLAND ROAD			
UNIT E & F		UNIT E & F			
CAPE CORAL FL 33909		CAPE CORAL FL 33909-2506		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/01/1996	
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21			292	62-063	
Surfe, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 FT. Myers	61	Trust Fund Contribution	Added to Fees
Zip	Country	3301125	Country	8. This corporation has liability for in	· · ·
24	25	29 33 ト 			Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10 Name and Address of New Registered Agent 10 Name and Address of New Registered Agent					
	uthers, Joseph M Cleveland Avenue			HROTHERS, KIN	perla
	T MYERS FL		82 Street Add	ress (P.O. Box Number is Not Acceptable	e) -
(•	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		83		<u> </u>
			84 City		les Zin Codo
			1 3-6	WASC	FL 33915
11. Pursuant	to the provisions of Sections 607.05 edistored agent, or both, in the State	02 and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the pition's board of directors. I hereby accep	rpose of changing its registered
agent La	m familiar with, and accept the obli-	pations of Section 607.0505, Flori	da Statutes.	morra board of directors. Thorsely accep	12/100
SIGNATURE C	ARCOURT LA	alher			21-1919
12.		unit and Title if applicable (NOTE I VD DIRECTORS	Ragistered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	FRS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE 9	REE.	Change Addition
NAME	CARUTHERS, JOSEPH M		1.2 NAME	CARUTHERS, JOSE	
STREET ADDRESS	3070 CLEVELAND AVENUE		1.3 STREET ADDRE.	ION EL BID AVE	•
Citr-S*-7iP	FORT MYERS FL 33901		1.4 CITY - ST - ZIP	47MJers \$1 3351	
THILF		[_] DELETE	2.1 TITLE	40	Change 🔀 Addition
NAME			2.2 NAME	-080 Err, wathle	ມ ຼ
STREET ADDRESS			2.3 STREET ADDRESS	8417 Cypress D	どう:
CHY-SI ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP	12 12 21 23 Al	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESC		
CHT-ST-7IP		DC: EXC	4.4 City-St-ZIP		
DILE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME Eller Lacourec			5.2 NAME		
STREET ACCRESS			5.3 STREET ADDRESS		
ETY S1-7IP TITLE		DELETE	5.4 C(TY-ST-ZIP 6.1 TITLE		Change Addition
MAME			62 NAME		الماللة
STREET ADORESS			63 STREET ADDRESS		
CHY-ST-ZIF			6.4 CITY-SI-ZIP		
14 Ldo herei	by certify that the information supplie	ed with this filing does not qualify		d in Section 119 07/3)(i) Florida Statutes	I further certify that the

4. I do herethy 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-3-5() 77(-46

Daytıme Phone

R2E034 (9/96)