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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092509 (5)

COURTESY IMPORTS OF TAMPA, INC.

Country

9. Name and Address of Current Registered Agent

25

SUITE 3700-BARNETT PLAZA

LUBRANO, ANDREW J 101 EAST KENNEDY BLVD.

**TAMPA FL 33602** 

Principal Place of business	
9210 ADAMO DRIVE TAMPA FL 33619	

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

9210 ADAMO DRIVE TAMPA FL 33619

2a. Mailing Address

City & State

Zw

Suite, Apt. #, etc.

26

27

28

29

## FILED Apr 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

6. Election Campaign Financing
Trust Fund Contribution

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30. No

10. Name and Address of New Registered Agent

1 Name

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.

Country

30

SIGNATURE Signature, typed or printed name of registered agent and lifte if applicable (NOTE Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE WOOLEY, J.I NAME 1.2 NAME 9210 ADAMO DRIVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - S1 - 7IP TITLE DELETE Change Addition 2.1 TITLE TEW, DOUGLAS M 2.2 NAME **3800 W HILLSBOROUGH AVE** STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34. CITY-S1-ZIP DELETE \_\_ Addition TITLE 4 1 THLE Change 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change ☐ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - St - ZiP DELETE Change Addition TITLE 6.1 THILE NAME 6.2 NAME STREET ADDRESS 6.3 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 allachment with an address.

SIGNATURE:

Douglas M. Tew

4/8/98

(813) 621-7747