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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093152 (3)

SHERIDAN STREET SERVICE STATION, INC.

Principal Place of Business

2503 NORTH RIVERSIDE DRIVE

Mailing Address

2503 NORTH RIVERSIDE DRIVE POMPANO BEACH FL 33062-1232

FILED Apr 28 1997 8:00am Secretary of State



POMPANO BEAG	CH FL 33062	POMPANO BEACH FL 33062-1232							
						3. Date Incorporated or Qualified 12/07/1995		e of Last I 1/1996	Report
	ace of Business	2a. Mailing Addre	ss			4. FEI Number			pplied For
21 2730	SHERIDAN ST	26				65-0623287			lot Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #, (etc.			5. Certificate of Status Desired		*	Additional lequired
City & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be I to Fees
ZID	Country	Zip	Co	ountry		This corporation has liability for it	ntangible t	ax under	s. 199.032.
24 ° 33') \$ O 25	29	30				Yes [
· .	9. Name and Address of Current					10. Name and Address of New Reg	gistered A	gent	
DES1	(ASIO, JOSEPH		72.1	81	Name				
	NORTH RIVERSIDE DRIVE			82	Ctroot Add	ress (I) O. Boy Number is Not Assentab	10)		
	PANO BEACH FL 33062			82	Sireet Add	Address (P.O. Box Number is Not Acceptable)			
1 4111	7,710 0001077712 00002			83	·, -				
1.				84	City		J=1	85 Zip	Code
							<u> </u>	<u> </u>	
SIGNATURE	ogistered agent, or both, in the State in familiar with, and accept the obligations by the properties of the state of the					poration submits this statement for the p tion's board of directors. I hereby accep ired when relinstating)	DATE DATE		s registered
12.	OFFICERS AND	DIRECTORS	13).		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D	Det	.ETE 1.1	TOLE				Change	Addition
NAME	DESTASIO, JOSEPH		1.2	NAME	1				
STREET ADDRESS	2503 NORTH RIVERSIDE DRIVE		1.3	STREET	ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33062		1.4	CITY - S	S1 - ZIP				
TITLE	D	☐ DEI	ETE 2.1	TITLE				Change	Addilion
NAME	DESTASIO, BEATRICE		2.2	NAME					
STREET ADDRESS	2503 NORTH RIVERSIDE DRIVE		2.3	STREET	ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33062		2.	4 CITY-	ST-ZIP				
TITLE		☐ DEI	LETE 31	TITLE				Change	Addition
NAME			32	NAME					
STREET ADDRESS			3.3	STHEE	ADDRESS				
CITY-ST-ZIP			3.4	L CTY-	ST-ZIP				
(TITLE		☐ DE	LETE 4.1	TITLE				Change	Addition
NAME			4.:	2 NAME					
STREET ADDRESS			4.3	STREE	ADDRESS				
CITY-ST-ZIP			4.4	CITY-S	ST-ZIP				
TITLE		DE:	LETE 5.1	TITLE				Change	Addition
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREE	I ADDRESS				
CITY-ST-ZIP	<u> </u>		5.4	CITY-	ST-ZIP				
TITLE		☐ DE	LETE 6.1	TITLE			,	Change	Addition
NAME			6.2	NAME					
STREET ADDRESS			6.3	STREE	I ADDRESS				
CITY-ST-ZIP				CITY-					
14 Ldo hereb	v certify that the information supplied	Lwith this filmo does o	not qualify for the	oe exe	emption state	d in Section 119.07(3)(i), Florida Statute	s. I further	certify that	at the

4. Ido 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 offect as it 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 changett, or on an attachment with an address.