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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

0330797

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000010705 (7)

THE PIT STOP, INC.

Principal Place of Business

SIGNATURE:

9975 PINE RUN COURT LAKE WORTH FL 33467		9975 PINE RUN COURT LAKE WORTH FL 33467-2339				
						3. Date Incorporated or Qualified 3a. Date of Last Report 02/02/1996
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				Not Applicable
Suite, Apt. #, etc 22		27	4			5. Certificate of Status Desired See Required Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	28 Zip		Country		Trust Fund Contribution L. Added to Fees
24	25 29 30		to the deliporation has mading in the area of a record a			
	9. Name and Address of Curre			4		10. Name and Address of New Registered Agent
BAR	ONE, SHARON		······································	81	Name	e .
	5 PINE RUN COURT		82 Street Add		Street	et Address (P.O. Box Number is Not Acceptable)
LAK	E WORTH FL 33467					
				63		
				84	City	85 Zip Code
						FL 1
office or r agent 1 a	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such char lations of, Section 607	nge was auth .0505, Florid	orized by a Statute	the cor.	ed corporation submits this statement for the purpose of changing its registered or
	Signature, typed or printed name of registered ag		(NOTE Re		ent signature	ure required when reinstating) OATE
12.	, and <u>resumment the second to the second to</u>	ID DIRECTORS	TI CTC	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D Barone, Sharon	U	ELETE	1.1 TITLE		Change Additio
NAME ON SCI ADDRESS	9370 W.W. 8TH ST. #317			1.2 NAME 1.3 STREET	ADDRESS	
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL 33428			1.4 CITY-5		
TITLE	DOOK IVITOR I L GOILD	[] D	ELETE	2.1 TITLE	51-217	☐ Change ☐ Additio
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET	ADDRESS	s
CHY - S1 - ZIP				2. 4 CITY-		
TITLE		D	ELETE	3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3 3 STREET	ADDRESS	s
CITY-ST-7P				3 4, CITY-	ST-ZIP	
THILE		□ 0	ELETE	4.1 TITLE		Change Additio
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	S
CITY-ST-ZIP			*****	4.4 CITY-5	T-ZIP	
Trite			ELETE	5.1 TIFLE		Change [_] Addition
NAME				5.2 NAME		
STREET ADDRESS					ADDRESS	8
CITY - ST - 7IP		<u> </u>	ELETE	5.4 CITY-5 6.1 TITLE	1 - ZIP	Change Additio
TITLE		E 0	LCLIL	6.2 NAME		La compe La route
NAME STREET ADDRESS					ADDRESS	
CITY-SI-ZIP				64 CITY-S		·
14. I do herel				or the exe	mption s	stated in Section 119.07(3)(i), Florida Statutes, I further certify that the
informatio Lam an o	on indicated on this annual report or	supplemental annual in the receiver or truste	report is true ee empowere	and acci	uráte and	nd that my signature shall have the same legal effect as if made under oath; th s report as required by Chapter 607, Florida Statutes; and that my name