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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000022083 (5)

MIKES AUTO SALES, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3312 W. COLUMBUS DRIVE 3312 W. COLUMBUS DRIVE TAMPA FL 33807 TAMPA FL 33607 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/07/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 3307 W COLUMBUS DE 21 59-3367942 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDEZ, MIGUEL 3312 W. COLUMBUS DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 **TAMPA FL 33607** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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. Lam familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes. (NOTE Registered Agent signature required when re-installing) OFFICERS AND DIBECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE FERNANDEZ, MIGUEL NAME 1.2 NAME R2E034 **6106 SILKDALE COURT** STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-\$1-7IP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change 6.1 1111.8 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 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 attachment with an address

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