## 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 # P96000056592 (4)

FLORIDA MOTORS RENEWAL, INC.

Principal Place of Business

Mailing Address

## FILED Jun 03 1997 8:00am Secretary of State



9609 RICHWOO PORT RICHEY		9609 RICHWOOD LANE PORT RICHEY FL 34688-4452								
						3. Date Incorporated or Qualified 07/01/1996	3a. Da	e of La	st Report	
2. Principal P	lace of Business Blvd	2a. Mailing Address 26			4. FEL Number 59 - 339 0 8 / 0		T	Applied For Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional				
City & State		City & State				<u> </u>		Required		
23 New		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution					
Zip # 24 24 C		Zip Cour 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	9. Name and Address of Current		10. Name and Address of New Registered Agent							
VILLANUEVA, PHIL 9809 RICHWOOD LANE PORT RICHEY FL 34668					81 Name					
					Street Addre	ddress (P.O. Box Number is Not Acceptable)				
, 0.,			8	3						
			ā	4	City			85 2	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statul	tes, the abo	J.	named corp	oration submits this statement for the p	FL prose of	changir	no its registered	
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.										
SIGNATURE										
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered agent OFFICERS AND			gent	signature require	ed when reinstating)	DATE	DIOCO	1000 111 10	
12.	D OPPICENS AND	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	Chan		
NAME	VILLANUEVA, PHIL	Deceit.	1.2 NAM				1	Unan	ge 🗀 Xudition	
STREET ADDRESS	9609 RICHWOOD LANE		1.3 STRE		DORESS					
CITY-ST-ZIP	PORT RICHEY FL 34668									
TITLE	D DELETE 2.17							Chan	ge Addition	
NAME	VILLANUEVA, MARIA		2.2 NAME							
STREET ADDRESS	9609 RICHWOOD LANE		2.3 STREET ADDRESS							
CITY-ST-ZIP	PORT RICHEY FL 34668		2.4 CITY	- ST	- ZIP					
TITLE	DELETE 3.1 TI							Chan	ge Addition	
NAME			3.2 NAM	E						
STREET ADDRESS			3.3 \$TRE	ET A	DORESS					
CITY-ST-ZIP		, Delete	3.4. CITY	-	- ZIP			10		
TITLE NAME		☐ DELETE	4.1 TITLE					Chan	ge Addition	
STREET ADDRESS			4.2 NAM 4.3 STRE		nnaree					
CITY-ST-ZIP			4.4 CHY							
TITLE		☐ DELETE	5 1 TITLE	_	ZIF			Chan	ge Addition	
NAME		<del></del>	5.2 NAM				'			
STREET ADDRESS			5 3 S1RE		DDRESS					
CITY-ST-ZIP			5.4 City		i					
TITLE		DELETE	61 HTLE					Chan	ge Addition	
NAME			62 NAM	Ē						
STREET ADDRESS			6.3 STRE	ET A	DDRESS					
CITY-ST-ZIP			64 CITY	- 51-	ZIP					
بامتموا مأسا فاس		241 41 2 692 4 4	1 / 11			. O .: 440 07/01/01 EL .: 1 Oc. / :				

14. I do 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, of on an experiment with an address.

CIONATURE. ////