

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

FILED  
May 13 1998 8:00am  
Secretary of State

DOCUMENT # P96000059357 (9)

1. Corporation Name

ATLANTIC PETRO/ENVIRO SALES & SERVICE, INC.



Principal Place of Business

321 SOUTH SECOND STREET  
FORT PIERCE FL 34950

Mailing Address

321 SOUTH SECOND STREET  
FORT PIERCE FL 34950

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 648 Angle Road  
Suite, Apt. #, etc.

22 City & State  
Fort Pierce, FL

23 Zip Country  
34947 St. Lucie

24 34947 25 St. Lucie

2a. Mailing Address

26 Post Office Box 1959  
Suite, Apt. #, etc.

27 City & State  
Fort Pierce, FL

28 Zip Country  
34954 St. Lucie

29 34954 30 St. Lucie

3. Date Incorporated or Qualified

07/16/1996

4. FEI Number

65-0666563

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BECHT, EDWARD W  
321 SOUTH SECOND STREET  
FORT PIERCE FL 34950

10. Name and Address of New Registered Agent

81 Name DONALD HOLMES  
82 Street Address (P.O. Box Number is Not Acceptable)  
7818 LONG COVE WAY  
83  
84 City ST LUCIE FL 85 Zip Code 34986

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 and title if applicable

(NOTE - Registered Agent signature required when reinstating)

DATE

DONALD R. HOLMES

4/28/98

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
CEOS  
HOLMES, DONALD R  
648 ANGLE ROAD  
FORT PIERCE FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PTD  
HOLMES, CYNTHIA S  
648 ANGLE ROAD  
FORT PIERCE FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
HOLMES, R S  
648 ANGLE ROAD  
FORT PIERCE FL 34947

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP  
PAPARELLA, PATRICK J  
5501 HICKORY DR  
FT PIERCE FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
DIRECTOR  
☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
PRESIDENT  
☒ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
☒ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
500002525735  
-05/15/98--01085--018  
\*\*\*150.00

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.

SIGNATURE

*[Signature]*

4/28/98 661-461-1111

CR2E034 (10/97)