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

P96000063001 (7) DOCUMENT # 1. Corporation Name

GUARDIAN CARS INCORPORATED

Principal Place of Business	Mailing Address
916 N. BEAL PKWY	916 N. BEAL PKWY
FT. WALTON BEACH FL 32547	FT. WALTON BEACH FL 32547

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business 916 N. BEAL PKWY		Mailing Address	Mailing Address			- 1 CONTROL LIE LEUN BEING BEING BEING BEING BEING BLIEB CHILL BEING BEING HEAL HÂL AN EI		
		916 N. BEAL PI						
	BEACH FL 32547	FT. WALTON BI						
						DO NOT WRITE IN THI	SPACE	
						 Date Incorporated or Qualified 07/29/1996 		
2. Principal f	Place of Business	2a. Mailing Add	ess			4. FEI Number	Applied For	
21		26				59-3393905	Not Applicab	
Suite, Apt	#, e1c.	Suite, Apt. #	etc.			* O	\$8.75 Additional	
22		27				6. Certificate of Status Desired	Fee Required	
City & Sta	te	City & State				6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	c.	ountry		8. This corporation owes or has paid the c	urrent year Intangible	
24	25	29	30			Personal Property Tax due June 30.	X Yes 🗌 No	
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registere	d Agent	
	DONALD, JAMES H JR.			81	Name			
	6 N. BEAL PKWY			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
FT.	. WALTON BEACH FL 32547			32	SHOOL MUU	reas (i .o. box inumber is inot Acceptable)		
				83				
				84	City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. Florid	ta Statutes the	above	named con	poration pulposite this statement for the surress	of all a - all - all a - all all all all	
OHILE OF	registered agent, or both, in the Si am familiar with, and accept the ob	iate of Florida. Such chari	CA WAS ALIINATIY	יעמיאסי	the corpora	tion's board of directors. I hereby accept the ap	pointment as registered	
SIGNATURE								
12,	Signature, typed or printed name of registered	AND DIRECTORS			t signature requi	red when reinstating) DATE	In Dipportant	
TITLE	OFFICERS		LETE 11			ADDITIONS/CHANGES TO OFFICERS AN		
NAME	MCDONALD, J H JR			TITLE	ŀ		☐ Change ☐ Addition	
	925 MARNAN DRIVE			NAME				
STREET ADDRESS	FT. WALTON BEACH FL 3	25.47	1.3	STREET A	DDRESS			
CITY-ST-ZIP	VI. WALTON BEACTITE 3			CITY-ST-	ZIP			
TITLE	MACDONALD TADA	□ DE	LEFE 2.1	TITLE			Change Additio	
NAME	MCDONALD, TARA		2.2	NAME				
STREET ADDRESS	925 MARNAN DRIVE	0E 47	2.3	STREET A	DORESS			
CITY-ST-ZIP	FT. WALTON BEACH FL 3			CITY-ST	- ZIP			
TITLE	ST NODONALD LYNNE 44	DE DE	LETE 3.1	TITLE			Change Additio	
NAME	MCDONALD, LYNNE M		3.2	NAME	ĺ			
STREET ADDRESS	925 MARNAN DRIVE	***	3.3	STREET AL	DDRESS			
CITY-ST-ZIP	FT. WALTON BEACH FL 3	2547	3.4.	CITY-ST-	- ZIP			
TITLE		DE	LETE 4.1	TITLE			Change Additio	
NAME			4.2	NAME				
STREET ADDRESS			4.3	STREET AL	DORESS			
CITY-ST-ZIP				CITY-ST-				
TITLE		☐ DE		TITLE			☐ Change ☐ Additio	
NAME				NAME				
STREET ADDRESS				STREET AL	INDRESS			
CITY-ST-ZIP								
TITLE	· ····································	□ DEI		CITY-ST- TITLE	LII		Change Addition	
NAME							Change Addition	
	1.0			NAME				
STREET ADDRESS	-		i i	STREET AU				
CITY-ST-ZIP			6.4 (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 changes, or on an attachment with an address.