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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Wortham

FILED

Apr 28 1997 8:00am

Secretary of State

. Na chiadh aid reall deann achail agus heach agus achail bhail agus ar ach ar an ar an an an an an an an an a

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000064392 (9)

WHEELS AUTO, INC.

SIGNATURE:

Principal Place of Business Mailing Address										
1623 NORRIS ROAD LOXAHATCHEE FL 33470		1623 NORRIS ROAD LOXAHATCHEE FL 33470					•			
						3. Date Incorporated or Qualified 08/01/1996	3a. Da	nte of Last I	Report	
2. Principal f	hace of Business	2a. Mailing Address				4. FEI Number	/	A	pplied For	
21		26				6506836	<u>ಬರ್</u>		ot Applicable	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Regulred				
City & State		City & State	City & State			B. Election Campaign Financing Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Count	ry		8. This corporation has liability for i	ntangible	tax under s		
24	25 9. Name and Address of Curr	29 ent Registered Agent	30			Florida Statutes 10. Name and Address of New Re	<u> </u>	No Agent		
SING	BER, MICHAEL D		8	1	Name	101 1101110 0110 21011000 01 11011 110	3.4.0,40	1gont		
1623 NORRIS ROAD			8:	82 Street Address (P.O. Box Number is Not Acceptable)						
LOX	AHATCHEE FL 33470		8:	3	~~~					
			8.	4	City			85 Zip	Code	
		500 1007 (500 F) 11 01 01 1			•		FL	'		
office or agent 1a	to the provisions of Sections 507.00 registered agent, or both, in the Starm familiar with, and accept the obtain	502 and 607.1508, Florida Statute of Florida. Such change was gations of, Section 607.0505, F	utes, the abo s authorized t Florida Statut	ve-i by t es.	named o	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of it the app	changing i pintment as	its registered registered	
SIGNATURE										
12.	Signature, typical or printed name of registered a	agent and little if applicable (NO IND DIRECTORS	OTE Registered A	gent	: Bignature r	equired when reinstating)	DATE	DIDECTO	DO INCAO	
TITLE	D OF FIGERS A	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFIC	ENS AND	Change	Addition	
NAME	SINGER, MICHAEL D		1.2 NAME					Change	L Naomon	
STREET ADDRESS	1623 NORRIS ROAD		1.3 STRE		noness					
CITY-ST-ZIP	LOXAHATCHEE FL 33470		1.4 CITY-							
TITLE		DELETE	2.1 TITLE					Change	. Addition	
NAME.			2.2 NAME	E						
STREET ADDRESS			2 3 STRE	ET AL	DDRESS					
City - St - ZiP			2.4 CITY		- 1					
TITLE		DELETE	3.1 TITLE					Change	Addition	
NAME			3.2 NAME	<u> </u>	- 1					
STHEET ADDRESS	,		3.3 STREE	ET AL	DDRESS					
011Y-S1-ZIP			3.4. CITY	- 57 -	ZIP					
THILE		☐ DELETE	4.1 TITLE					☐ Change	Addition	
NAME			4. 2 NAM	E						
STREET ADDRESS			4.3 STREE	et al	DDRESS					
CHTY+S1+ZIP			4.4 CiTY-	ST-	ZIP					
TITLE		DELETË	5.1 TETLE					Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 \$TREE	ET AL	DDRESS					
C-TY - ST - ZIP		[] Artists	5.4 CITY-		ZIP				1 4 4 4 5 2	
TITLE		DELETE DELETE	6.1 TITLE					Change	☐ Addition	
NAME Annual Absorbes			6.2 NAME							
STREET ADDRESS			6.3 STREE							
14. Ldo here	by certify that the information suppl	and with this filing does not aug	6 4 CITY-	SI-	ZIP votice et	eted in Section 119 07/3V/). Florida Statuto	further	cortifu that	tha	
informatio Lam an d appears i	on indicated on this annual orbirt or officer or director of the co-position in Block 12 or Block 13 if changes,	supplemental annual report is or the receiver or trustee empo or on an attachment with an ac	s true and acc wered to exe ddress.	cut	ate and t te this re	ated in Section 119.07(3)(i), Florida Statutes that my signature shall have the same legal port as required by Chapter 607, Florida S	effect as latutes; ar	if made un nd that my	nder oath; that name	