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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DCUMENT # P96000068853

DVANCED AUTO SALES WHOLESALE OUTLET, INC.

Pincipa	Place of Busin	E
9495 S.	HIGHWAY 17-92	
MÁITLAN	Il Place of Busin HIGHWAY 17-92 D FL 32751	

Principal Place of Business

Mailing Address

9495 S. HIGHWAY 17-92 MAITLAND FL 32751

2a. Mailing Address

26

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90029 022 ***150.00



Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

08/16/1996

59-3093113

4. FEI Number

	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			
		27		p coelleth fire frank :			
City & Stat	te	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
		28	Country		8. This corporation owes the current		
P P	Country	Zip	Country		Personal Property Tax.	year intangible ; ☐ Yes ;	□No
	25 29 30				10. Name and Address of New Regi		
<u> </u>	9. Name and Address of Current	Registered Agent		81 Name	t arakini kilik	Taja 4	
HUGGINS, HENRY L 124 HOWELL BRANCH ROAD			- Name	(1) 10 mm (1) 1	341 47		
			82 Street Add	ress (P.O. Box Number is Not Acceptable			
	ITER PARK FL 32789		-		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Andreas (Aug. 1964). Andreas (Aug. 1964).	LIGHT ST
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No.				84 City		85 Zip (Code
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Pursuant	t to the provisions of Sections 607.0502	and 607.1508, Florida Stat	utes, the at	ove-named corp	poration submits this statement for the pur on's board of directors. I hereby accept th	pose of changing its e appointment as rei	registered distered
office or I	registered agent, or both, in the State of am familiar with, and accept the obligation	riorida. Such change was	autnonzed Iorida Statu	by the corporati	or a board of directors. Thereby accept the	c appointment as re-	91010.00
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
NATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered	Agent signature require		DATE	
<u>:</u> .	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
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indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am are 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, with all other like empowered.

STANLOY R. Roynolds Predet