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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000071162 (7)

EXECUTIVE MOBIL SOUTH, INC.

Principal Place of Business Mailing Address						
4090 STATE RD 7		4090 STATE RD 7 MIRAMAR FL 33024	4090 STATE RD 7			
					DO NOT WRITE IN THIS SPACE	_
					3. Date Incorporated or Qualified 08/27/1996	
2. Principal	Place of Business	2a. Mailing Address	a. Mailing Address		4. FEI Number Applied For	\Box
21 26			·		65-0692426 Not Applicab	le
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	ľ
City & Sta	City & State	State		6. Election Campaign Financing \$5.00 May Be	٦	
28 28				Trust Fund Contribution	╛	
Zip 24	Country 25	Zip 29	p Coun		6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ✓ Yes ☐ No	
	9. Name and Address of Current		1991		10. Name and Address of New Registered Agent	7
N	MUSSMAN, JAY D		8	1 Name		٦
5881 N 151 ST #101			8	2 Street A	Address (P.O. Box Number is Not Acceptable)	\dashv
N	MAMI LAKES FL 33014		8			4
			ľ	3		-
			8	4 City	FL 85 Zip Code	٦
11. Pursuent 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 agen			gent signature re	required when reinstating) DATE	<u> </u>
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u>.</u>
NAME	BAKATSELOS, PLATON		1.2 NAM	- 1	- Starte	" ·
STREET ADDRESS	4000 CTATE DD 7		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33024		1.4 CITY-ST-ZIP			1
TITLE	D	☐ DELETE	21 TITLE		Change Addition	_m
NAME	B AKATSELOS, ELEFTHERIA		2.2 NAM			Į
STREET ADDRESS			2.3 STRE	E1 ADDRESS		ŀ
CITY-ST-ZIP	MIRAMAR FL 33024		2. 4 CITY	-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition	n
NAME	BAKATSELOS, DIMITERIOS		3.2 NAM			-
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIRAMAR FL 33024	DECEME	3.4, CITY			_
TITLE	BAKATSELOS, ARISTOTLE	L. DELETE	4.1 71748	1	Change Addition	n
NAME	AMM STATE DO 7		4. 2 NAM	- 1		
STREET ADDRESS	MIRAMAR FL 33024			ET ADDRESS		
CITY-ST-ZIP TITLE	THE PRINTING OUTET	DELETE	4.4 City 5.1 Title		Change Addition	\exists
NAME			5.2 NAM	1	- Orango - Indone	<u> </u>
STREET ADDRESS	, [4	ET ADDRESS		
CITY - ST-ZIP			5.4 CITY			-
TITLE	 	DELETE	6.1 TITLE		☐ Change ☐ Addition	\mathbf{I}
NAME			6.2 NAM			
STREET ADDRESS			6.3 STRE	et address		

14. Thereby certify that the information supplied with this filling 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 any 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 trustoment with an areness.

Block 12 or Block 13 if change it or on an attachmost with an areness.