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Mar 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078406 (1)

1. Corporation Name

AUTO-MATE AUTOMOTIVE SALES, INC.



Principal Place of Business

Mailing Address

2336 HIGH STREET
WINTER PARK FL 32792

2336 HIGH STREET
WINTER PARK FL 32792-1807

2. Principal Place of Business

21 4815 WEST ROBINSON ST.

Suite, Apt. #, etc.

2a. Mailing Address

26 1018 GALS WORTHY AVE.

Suite, Apt. #, etc.

22 City & State

23 ORLANDO FL.

Zip

Country

24 32811

25

27 City & State

28 ORLANDO FL.

Zip

Country

29 32809

30 ORANGE

3. Date Incorporated or Qualified

09/20/1996

3a. Date of Last Report

4. FEI Number

69-8402704

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LAUGHLIN, KEVIN S
2336 HIGH STREET
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition
1.2 NAME MALOSSEV, DOUGLAS M
1.3 STREET ADDRESS 1018 GALS WORTHY AVE.
1.4 CITY - ST - ZIP ORLANDO, FL 32809

2.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
2.2 NAME WM. MCNABB
2.3 STREET ADDRESS 1539 OAKWOOD CT.
2.4 CITY - ST - ZIP APOPKA FL. 32703

3.1 TITLE SECRETARY ☐ Change ☒ Addition
3.2 NAME WM. MCNABB
3.3 STREET ADDRESS 1539 OAKWOOD CT.
3.4 CITY - ST - ZIP APOPKA FL. 32703

4.1 TITLE TREASURER ☐ Change ☒ Addition
4.2 NAME DOUGLAS M. MALOSSEV
4.3 STREET ADDRESS 1018 GALS WORTHY AVE.
4.4 CITY - ST - ZIP ORLANDO FL 32809

5.1 TITLE DIRECTOR ☐ Change ☒ Addition
5.2 NAME KEVIN S. LAUGHLIN
5.3 STREET ADDRESS 2336 HIGH ST.
5.4 CITY - ST - ZIP WINTER PARK FL. 32792

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

Kevin S. Laughlin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/97

Date

Daytime Phone #

CR2E034 (9/96)