

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

FILED

Jul 13 1998 8:00am
Secretary of State

Amended PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT #
1. Corporation Name

P96000086301
LANCE Automotive, Inc.

Principal Place of Business

Mailing Address

1491 North State Road #7
Pompano Beach, FL 33063

Amendment

3. Date Incorporated or Qualified 10/18/96 3a. Date of Last Report 4/97

4. FEI Number P96000086301 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

2. Principal Place of Business

21. State, Apt. #, etc. 26. State, Apt. #, etc.

22. City & State 27. City & State

23. Zip 24. Country 25. Zip 29. Country 30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Robert E. Cobb, Esq.
4330 N. FEDERAL AVE
FORT LAUDERDALE, FL 33308

01. Name

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

03.

04. City 05. Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, 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 of person who has been appointed as registered agent and filed applicable

Signature of person who has been appointed as registered agent and filed applicable

DATE

12. OFFICERS AND DIRECTORS

1. TITLE President 1.1 DELETE ☒

2. NAME Bobby Crook

3. STREET ADDRESS 4134 NW 75th Ave

4. CITY, ST, ZIP Sunrise, FL 33351

5. TITLE ☐ DELETE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE ☐ DELETE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE ☐ DELETE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition

2. NAME Gary M. Roonce

3. STREET ADDRESS 1491 North State Road #7

4. CITY, ST, ZIP Pompano Beach, FL 33063

5. TITLE ☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE ☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE ☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE ☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE ☐ Change ☐ Addition

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27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE ☐ Change ☐ Addition

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31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE ☐ Change ☐ Addition

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37. TITLE ☐ Change ☐ Addition

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41. TITLE ☐ Change ☐ Addition

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89. TITLE ☐ Change ☐ Addition

90. NAME

91. STREET ADDRESS

92. CITY, ST, ZIP

93. TITLE ☐ Change ☐ Addition

94. NAME

95. STREET ADDRESS

96. CITY, ST, ZIP

97. TITLE ☐ Change ☐ Addition

98. NAME

99. STREET ADDRESS

100. 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 included 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 registered or limited partner 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: [Signature] 7/8/98 984749-0055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Month/Year

CR2E034 (9/96)