SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



CLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000088239 (4)

SAVE-ON MOTORS, INC.

	Principal Place of Business	Mailing Address					
	1975 AURORA ROAD MELBOURNE FL 32935	1975 AURORA ROAD MELBOURNE FL 32935					
					DO NOT WRITE	E IN THIS	SPACE
					3. Date Incorporated or Qualified 10/24/1996		
	2. Principal Piaco of Business	2a. Mailing Address	. 0.1	÷	4. FEI Number		
:	alSave-On Motors; live	26 1975 QUKUKA	i ka 🔻		59-3406990		[
1	Suite, Apt. #, etc.	Suite, Apt. #, etc.	_		5. Certificate of Status Desired		\$8.7 Fee
2	City & State 3 MEINDURME, F.L.	City & State			Election Campaign Financing Trust Fund Contribution		\$5. 0 Add
2	1 32935 25 USA	Z(j)	Country 30		This corporation owes or has painted Property Tax due June		rent year
-	9. Name and Address of Current Registered Agent				10. Name and Address of New Re	gistered	Apent
	MILLS, ERIN		81	Name ERI	N SANTA CROCE		
	1975 AURORA ROAD Melbourne Fl 32935		82	Street Addre	ss (F'O Box Number is Not Acceptabl	e)	
	MELDOOMIL 1E 32833		83	1975 (T MYNYN TV		
Ì			84	City I			Ta-T
				""Mell	DURNE	FL	· 85 3
	 Pursuant to the provisions of sections 607.0 office or registered agent, or both, in the St. 	502 and 607.1508, Florida Statut ate of Florida. Such change was	es, the above-i	named corpora	tion submits this statement for the purp	ose of ch	nanging its
	agent. I ally tamiliar with, and accept the ob	Igations of section 607,0505, F	lorida Statutes		1X1XIT 9/18/108	nice citypica	imitolit es

10 **FILED** Oct 01 1998 8:00am Secretary of State



Applied For Not Applicable \$8.75 Additional Fee Required

1975			Country 81 Name 1 R 82 Street Addre	6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 10. Name and Address of New Registered Agent N SANTA CRUE 5. (F.O. Box Number is Not Acceptable)			
office of	t to the previsions of sections 607.0502 registered agent, or both, in the State all tamiliar with and agent the obliga	ว่า Florida. Such change was au	thorized by the corporatio	DURNE attorion to	FL 85 329345 or the purpose of changing its registered y accept the appointment as registered 8/98		
	Summan April or printed name of registered agent OF FICERS ANI		E Registered Agent signature requi		DATE		
10116	P "	DEFETE	13.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS IN 12		
NAME.	CROCE, ERIN SANTA	Librien	1.2 NAME		Change . Addition		
STREET ADDRESS	265 BAYHEAD DR		1.3 STREET ADDRESS				
City-st-zip	MELBOURNE FL		1.4 CITY-S1-ZIP				
THILE	VP	DELETE	2171116		Change Addition		
NAME	SANTA CROCE, KEVIN	[Jorren	2.2 NAME		Change [] Admitted		
STRLET ADDRESS !	265 BAYHEAD DR		2 3 STREET ADDRESS				
CITY-ST-ZIP	MELBOURNE FL		2.4 CiTY-S1-7iP				
HILF		[DELETE	3111116		Change Addition		
NAME		į į į į į į į į	3.2 NAME		Change [Addition		
STREET ADORESS			3 3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CHY-S1-ZIP				
TITLE	-	[] DELETE	4.17DLE		Change Addition		
NAME		į journi	4 2 NAME		L Change [] Addition		
STREET ADDRESS			4.3 STREET ADDRESS				
City-\$1-ZiP			4.4 CITY-ST-ZiP				
TITLF	-	DELETE	5.1 1 ITLE	the second of th	Change Addition		
NAME		t lotter	5.2 NAME		Change Addition		
STREET ADDRESS			53 STREET ADDRESS				
CITY-ST-ZIP			5.4 CHY-ST-7IP				
INLE	-	[]DELETE	617111.6		Change Addition		
NAME		f Language	6 2 NAME		L_ Change [] retuition		
STREET ADDRESS			6 3 STREET ADDRESS				
CITY-\$1-7/P			6.4 CiTY-S1-ZiP				
14. I hereby ce	ertify that the information supplied with the orbits annual report or supplied mortal and	is filing does not qualify for the	exemption stated in section	on 119.07(3)(i), Florida Statuto	s. I further certify that the information		

an officer or director or suppressional minutal report is true and accurate and mat my signature shall have the same logal effect as if made under oath; that I am an officer or director or the couperation 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 3 changed, of on an attachment with an address.

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