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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 25 1997 8:00am

Secretary of State

POCUMENT # P96000093590 (3)

SUNBELT VALET PARKING, INC.

Principal Place of Business Mailing Address \$12 COBLE DRIVE 312 COBLE DRIVE LONGWOOD FL 32779 LONGWOOD FL 32						
					3. Date Incorporated or Qualified 11/08/1996	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
Sulte, Apt. #, etc.		26			59-3409221	Not Applicable
22		Suite, Apt. #, etc.	h		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28	Cour		Trust Fund Contribution	☐ Added to Fees
24	p Country 7ip 25 29		Country 30		8. This corporation has liability for i	ntangible tax under s. 199.032, Yes X No
=11	9. Name and Address of Curr	ent Registered Agent	30		10. Name and Address of New Reg	
JOH	INSON, ERIC H			Name		
312 COBLE DRIVE			[32 Street Add	dress (P.O. Box Number is Not Acceptab	n)
LON	IGWOOD FL 32779					
				33		
			Ţē	City		FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	im tamiliar with, and accept the ob	ligations of, Section 607.0505	o, Florida Statu	les.	poration submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
12.	Signature, typed or printed name of registered	ogent and title if applicable NDD DIRECTORS	(NOTE: Registered)	Agent signature requ	ired when roinstating) ADDITIONS/CHANGES TO OFFIC	DATE
TITLE	D (2710):1137	DELETE		f	AUDITIONS/CHANGES TO OFFIC	Change Addit
NAME	JOHNSON, ERIC H		1.2 NAM			
STREET ADDRESS	312 COBLE DRIVE		1.3 STR	EET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL 32779		1.4 CiTy	'- \$1 - 7(P		
TITLE	☐ DELETE		2.1 TITE	E		Change Addition
NAME DIDECT ADDRESS			2.2 NAM	}		
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS	•	,
TITLE		DELFTE	3.1 1(1)	Y - S1 - ZIP E		Change Addition
NAME			3.2 NAM	IE		
STREET ADDRESS			3.3 STR	ET ADDRESS		
CITY-ST-ZIP		776		7-S1-7IP		
TITLE		☐ DELETE	4.1 TITU			Change Addition
NAME Street adoress			4.2 NAM	!		
CITY-ST-ZIP				ET ADDRESS -ST-7IP		
TITLE		DELETE	5.1 TITL			Change Addition
NAME			5.2 NAM	ii		
STREET ADDRESS			5.3 STRE	E1 ADDRESS		
CITY-ST-ZIP	100		5.4 CITY			
TITLE		DELFTE	6.1 TITLE			Change Addition
NAME Street address	· · · · · · · · · · · · · · · · · · ·		6.2 NAM			
ALLIECT VATOLICOS			■ 6.3 \$186	ET 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 comporation 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 or an attachment with an address.