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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000101881 (6)

DAN'S AUTO & MARINE SERVICE, INC.

Principal Place of Business

Mailing Address

FILED Mar 19 1998 8:00am Secretary of State



8191 46TH AVE N 8191 46TH AVE N ST PETERSBURG FL 33709 ST PETERSBURG FL 33709 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/16/1996 2, Principal Place of Business 2a. Mailing Address 59-3415336 4. FEI Number Applied For 21 APPLIED FOR 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zφ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No 24 25 □ No 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name DONAT, DANIEL K 8191 46TH AVE N B2 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33709 83 84 City 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 pointed name of registered agent and title it apple able (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.5 TITLE ☐ Change DONAT, DANIEL K NAME 1.2 NAME 8191 46TH AVE N STREET ADDRESS 1.3 STREET ADDRESS ST PETERSBURG FL 33709 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIF 2 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change ☐ Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE. TITLE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE Addition TITLE 5 t TITLE Change NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP

14. Thereby 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 agoual 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 of 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 hanged, or only nattacture newtheres.

SIGNATURE: