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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000015683 (0)

STL AUTO SALES, INC.

FILED Mar 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						I BOOKA 11000 BILLA EURO			
2300 N STANFORD RD 2300 N STANFORD RD									
PANAMA CITY FL 32405 PANAMA CITY FL 32405									
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 02/15/1997			
2. Principal P	2a. Mailing Address	ing Address			4. FEI Number		pplied For		
21		26				59-3450858	N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				b. Continuate of Status Desired	Fee F	equired	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23	28					Trust Fund Contribution	Added Added	to Fees	
Zip	Country	Zip	<u>├</u>	intry		8. This corporation owes or has paid			
24	25	29	30	T		Personal Property Tax due June 3		No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
GIBBONS, GARY C				ויסן	Name				
2300 N STANFORD RD PANAMA CITY FL 32405				82	Street Address (P.O. Box Number is Not Acceptable)				
				83					
				84	4 City FL 85 Zip Code			Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above						poration submits this statement for the pur		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 tills it applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.		ID DIRECTORS	13.	u Agen	alg Miore redui	ADDITIONS/CHANGES TO OFFICE		RS IN 12	
TITLE	D	DELETE 1.5 TI		TLE			Change	Addition	
NAME	2300 N STANFORD RD		1.2 N	1.2 NAME					
STREET ADDRESS			1.3 S		DORESS				
CITY-ST-ZIP			1.4 C	1,4 CITY-ST-ZIP				ļ	
TITLE	DELETE 2.1 T 22 N			2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 S1	2.3 STREET ADDRESS					
CITY-ST-ZIP			2.4 C	ITY-ST	- ZIP				
TITLE			_	3.1 TITLE			☐ Change	Addition	
NAME	3.2		3.2 N/	3.2 NAME				1	
STREET ADDRESS	1		3.3 STREET ADDRESS		DDRESS				
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TITLE		DELETE	5.1 10				Change	☐ Addition	
NAME			5.2 NAME					ļ	
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CITY-ST-ZIP	•		•	5.4 CITY-ST-ZIP					
TITLE				i.1 TITLE			Change	Addition	
NAME				6.2 NAME			_		
STREET ADDRESS					DDRESS			1	
				5.4 CITY-ST-ZIP					
			0.7 01	· · · · ·					

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 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:

(850) 785.81elel