

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90028 021 ***150.00

DOCUMENT # P97000017740

1. Corporation Name
DEALS ON WHEELS AUTO SALES INC.

Principal Place of Business

~~6972 BLANDING BLVD.~~
~~1416 KINGSLEY AVENUE~~
~~JACKSONVILLE FL 32244~~
~~US~~

Mailing Address

~~C/O DAVID A. KING-ESQ.~~
~~1416 KINGSLEY AVENUE~~
~~ORANGE PARK FL 32073~~

2. Principal Place of Business

21 6972 Blanding Boulevard

Suite, Apt. #, etc.

22

City & State

23 Jacksonville, FL

Zip Country

24 32244 25 USA

2a. Mailing Address

26 6972 Blanding Boulevard

Suite, Apt. #, etc.

27

City & State

28 Jacksonville, FL

Zip Country

29 32244 30 USA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1997

4. FEI Number

59-3434524

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~KING, DAVID A-ESQ.~~
~~1416 KINGSLEY AVENUE~~
~~ORANGE PARK FL 32073~~

10. Name and Address of New Registered Agent

81 Name
Mary B. Williams

82 Street Address (P.O. Box Number is Not Acceptable)
2954 Beaver Street

83

84 City
Middleburg, FL

FL

85 Zip Code
32068

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 *X Mary B Williams secretes*

2-15-99

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME WILLIAMS, MARY B

STREET ADDRESS 2954 BEAVER STREET

CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE ☐ DELETE

NAME WARD, BOB V

STREET ADDRESS 5316 JACARANDA AVENUE

CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE ☐ DELETE

NAME WARD, LINDA K

STREET ADDRESS 5316 JACARANDA AVENUE

CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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, with all other like empowered.

SIGNATURE: *X Mary B Williams secretes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-99

Date

904-772-6005

Daytime Phone #

CR2E034 (11/98)