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

Mailing Address

805 CHERRY ST

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700020008

1. Corporation Name

Principal Place of Business

805 CHERRY ST

SIGNATURE

CARL'S AUTO ELECTRIC, INC.

WINTER PARK PL 32709		WINTER PARK PE 32703			DO NOT WRITE IN THIS SPACE						
						 Date Incorporated or Qualife 02/27/1997 	ď				
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address				- A Common C		App	lied For	
21		26	26				355928			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired				Iditional	
22		27	27			3. Certificate of States Boomes		Fe	e Req	uired	
City & State	e	City & State	City & State			6. Election Campaign Financing	Э П	•		May Be	
23						Trust Fund Contribution		Ad	ded to	Fees	
Zip				itry		8. This corporation owes the cu			r	~,.	
24	25		0			Personal Property Tax.		Yes		∐No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent 81 Name						
TALBERT, STEPHEN C					Name						
805 CHERRY ST			- 1	82 Street Address (P.O. Box Number is			otable)				
WINTER PARK FL 32789			-	83							
141141	IER FAIR 1 E 32/09			03							
				84	City		FL	85	Zip C	ode	
office or n	egistered agent, or both, in the State	e of Florida. Such change was aut	norizea	Dy tr	named co	orporation submits this statement for that ation's board of directors. I hereby acc	e purpose of o	hangii tment	ng its r as reg	egistered istered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Floric	da Statu	tes.							
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	Agent s	signature reqi	uired when reinstating)	DATE					
12.			13.			ADDITIONS/CHANGES TO O	FFICERS AN				
TITLE	PTD	☐ DELETE 1.11		.E				☐ Cha	ange	☐ Addition	
NAME	TALBERT, STEPHEN C			ΛE							
STREET ADDRESS	805 CHERRY ST 13S		1.3 STF	REETA	ADDRESS						
CITY-ST-ZIP			1.4 CIT	Y-ST-	ZIP						
TITLE	470		2.1 TITL	2.1 TITLE				☐ Chá	ange	☐ Addition	
NAMÉ	Treberry of the		2.2 NA	2.2 NAME					-		
STREET ADDRESS	300 1# 11 220 311		2.3 \$TF	2.3 STREET ADDRESS							
CITY-ST-ZIP			2 4 CIT	2 4 CITY-ST-ZIP							
TITLE		☐ DELETE						☐ Ch	ange	☐ Addition	
NAME			3.2 NA	ΜE						•	
STREET ADDRESS			3.3 STF	REETA	ADDRESS						
CITY-ST-ZIP			3.4. CIT		ZIP			C Ch		[] Addition	
TITLE.		☐ DELETE	•		Ì			☐ Ch	ange	Addition	
NAME			4. 2 NA								
STREET ADDRESS			4.3 STF	REETA	ADDRESS						
CITY-ST-ZIP			4.4 CIT		ZIP						
TITLE		☐ DELETE	5.1 TITU		1	•		☐ Ch	ange	☐ Addition	
NAME			5.2 NAM		, DODGGG						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5.4 CIT		ZiP			☐ Ch	2000	Addition	
TITLE		☐ DELETE							aige		
NAME	}		6.2 NA							•	
STREET ADDRESS			1		ADDRESS						
CITY-ST-ZIP			6.4 CIT	Y-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 parantischment with an address, with all other like empowered.

4076477015

FILED

May 07, 1999 8:00 am Secretary of State

05-07-1999 90127 025 ***150.00

CR2E034 (11/98)

= --

= ;:-

=:::