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Mar 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000024830 (6)

1. Corporation Name

RED TOP AUTO SALES, INC.

Principal Place of Business

4852 HUNTER GREEN DRIVE
FORT MYERS FL 33905

Mailing Address

4852 HUNTER GREEN DRIVE
FORT MYERS FL 33905

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3154 PALM BEACH BLVD

Suite, Apt. #, etc.

22 FT. MYERS, FL

23 City & State

24 33916

Country

25 USA

2a. Mailing Address

Suite, Apt. #, etc.

27 City & State

28

Country

29

30

3. Date Incorporated or Qualified

03/17/1997

4. FEI Number

65-0744665

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FIELDS, PAUL A
3154 PALM BEACH BOULEVARD
FORT MYERS FL 33916

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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



(NOTE: Registered Agent signature required when reinstating)

2/28/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DVP
STREET ADDRESS FIELDS, PAUL A
CITY-ST-ZIP 3154 PALM BEACH BOULEVARD
FORT MYERS FL 33916

TITLE ☐ DELETE

NAME D P S
STREET ADDRESS FIELDS, MAUREEN E
CITY-ST-ZIP 3154 PALM BEACH BOULEVARD
FORT MYERS FL 33916

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL A. FIELDS

DATE

2/28/98
Daytime Phone # 0423260

CR2E034 (10/97)