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

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700027648 (9)

FILED Apr 29 1998 8:00am Secretary of State

RICH'S PALM BAY EXXON, INC.	(4	,		
Principal Place of Business	Mailing Address		T KARIJADE KIN INITI KANIL NAVIL NAVIL NAVIL NAVIL	(1911 10010 01111 BIBD) (011 FAD)
4540 DIXIE HIGHWAY Palm Bay Fl 32905	4540 DIXIE HIGHWAY PALM BAY FL 32905		DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address		03/24/1997 4. FE! Number	/ Applied For
21	26		5-9-3437184	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	T-0-1	Trust Fund Contribution	Added to Fees
Zip Country	Zφ	Country	8. This corporation owes or has paid the	
24 25 25 Name and Address of Curre	29 ent Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
ERNEST, RICHARD		81 Name		
4540 DIXIE HIGHWAY		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
PALM BAY FL 32905		OZ SILEBI AUU	ress (F.O. Box Number is Not Acceptable)	
		83		
		84 City		85 Zip Code
			F	L
11. Pursuant to the provisions of Sections 607 05 office or registered agent, or both, in the State	602 and 607.1508, Florida Sta ld le of Florida, Such change was	ites, the above-named corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered
agent. I am familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statutes.	tions board of directors. Thereby according to	ppointment as registered
SIGNATURE	and the second second	2000		
Signature, typed or printed name of registered at 12. OFFICERS At	gent and title if applicable [NC ND DIRECTORS	Iff: Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME ERNST, RICHARD		1.2 NAME		-
STREET ADDRESS 3069 INDIAN RIVER DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP PALM BAY FL 32905		1 4 CITY-ST-ZIP		
TITLE	DELETE	21 TITLE		Change Addition
NAME		2 2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS	3.	
CITY-ST-ZIP	T DELETE	2. 4 CITY-S1-ZIP		
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		3.2 NAME		
		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		į
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	61 THLE		Change Addition
NAME		62 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP	Section 119.07(3)(i), Florida Statutes. I further	

4. 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 logal offect as if made under oath; that I am an officer or director of the corporation or the recever 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 on an attachment with an address.

CICHATURE!

Dollar

407/724-4177

CR2E034 (10/9