

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000042720 (7)

1. Corporation Name
CENTRAL AUTO, INC.



Principal Place of Business

918 DERBYSHIRE DRIVE
KISSIMMEE FL 34758

Mailing Address

918 DERBYSHIRE DRIVE
KISSIMMEE FL 34758

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1997

2. Principal Place of Business

2a. Mailing Address

21 1015 N. CENTRAL AVE 26 1015 N. CENTRAL AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27 City & State

23 KISSIMMEE, FL

28 KISSIMMEE, FL

Zip

Country

Zip

Country

24 34741

25

29 34741

30

4. FEI Number

59-3445690

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

10. Name and Address of New Registered Agent

CHACE, JAMES M
918 DERBYSHIRE DRIVE
KISSIMMEE FL 34758

81 Name

ROBERT PARKS JR.

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

1015 N. CENTRAL AVE

83

84

City

KISSIMMEE

FL

85 Zip Code

34741

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

Robert Parks Jr. pres.

Signature typed or printed name of registered agent as it appears on file

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CHACE, JAMES M
918 DERBYSHIRE DRIVE
KISSIMMEE FL 34758 ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PARKS, ROBERT JR
313 W COLUMBIA AVE, APT A
KISSIMMEE FL 34741 ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

D
ROBERT PARKS JR.
1940 CATTLETA DR
KISSIMMEE FL 34741 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROSADO, LUIS ROBLES
1613 COLUMBIA ARMS CIRCLE, #243
KISSIMMEE FL 34741 ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, upon an attachment with an address.

SIGNATURE

Robert Parks Jr.

pres.

4/28/98

407 841-7207

CR2E034 (10/97)