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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT # P97000 AUTOMOTIVE, INC.	0044388 (1)	*******			ILAN BIBBB MAN KANK IRN KEN
Principal Place	e of Business	Mailing Address			-	
•						
3892 PROSPECT AVENUE 3892 PROSPECT AVENUE NAPLES FL 34104 NAPLES FL 34104					1	
		WW.CEO 1 C 41101			DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified 05/15/1997	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		26		54.544.547.5	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	1 1		6. Election Campaign Financing Trust Pund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30		This corporation owes or has paid the opersonal Property Tax due June 30.	Yes 🔊 No
	g. Name and Address of Currer	it Registered Agent	81	Atomo-	10. Name and Address of New Registers	od Agent
	DOWELL, DANNAY D		81	Name	•	
4960 21ST AVENUE, SW			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
NAPLES FL 34116			83			
			63			
				City	F	85 Zip Code
office or re agent. I all SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation Storature, typed or printed name of registered age	of Florida. Such change was au ations of, Section 607.0505, Flor	uthorized by trida Statutes.	he corporation	oration submits this statement for the purpose on a board of directors. I hereby accept the a	ppointment as registered
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELET <b>e</b>	1.1 TITLE			Change Addition
NAME	MCDOWELL, DANNY D		1.2 NAME			
STREET ADDRESS	4960 21ST AVENUE, SW		1.3 STREET AL	DDRESS		
CITY-ST-ZIP	NAPLES FL 34116		1.4 CITY-ST-	ZIP		
TITLE		☐ DELETE	2.1 TITLE	1		☐ Change ☐ Addition
NAME			2.2 NAME	[		
STREET ADDRESS			2.3 STREET AL			
CITY-ST-ZIP			2. 4 CITY-ST-	ZIP		Change Addition
TITLE				i		CT CHRUTE CT VODICION
NAME			3.2 NAME			
STREET ADDRESS	!		3 3 STREET AL	l l		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - 4.1 TITLE	ZIP		Change Addition
NAME		C) Marie	4.1 MILE 4.2 NAME			
STREET ADDRESS			4.3 STREET AS	OORESS		
CITY-ST-ZIP			4.4 CITY-ST-	1		
TITLE		DELETE	5.1 TITLE	<del></del>		Change Addition
NAME	l		5.2 NAME			
STREET ADDRESS			5.3 STREET AL	ODRESS		]
CITY-ST-ZIP			5.4 CITY-ST-	1		
TITLE		DELETE	5.4 CITY-51-	*		Change Addition

6.4 CITY - ST - ZIP 14. Thereby 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.

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Mar 30 1998 8:00am

Secretary of State