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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000057586 (4)

JOHNSON AUTO SALES OF BREVARD, INC.

Principal Place of Business Mailing Addre

FILED

Apr 24 1998 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Add	Mailing Address			
1901 ROBERT	T CONLAN BLVD. NE L 32905		1901 ROBERT CONLAN BLVD. NE PALM BAY FL 32905			
	- 4-700	THE BETT	12 02000			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						06/12/1997
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number Applied For
21		26	26			.59-345 8 \\ Not Applicable
Suite, Apt.	#, etc	Suite, A	Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State	e		City & State			Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Zip Country		Zip Country		,	8. This corporation owes or has paid the current year Intangible
24	25	29	3	10		Personal Property Tax due June 30. Yes No
	g, Name and Address of Curr	ent Registered Ag	ent			10. Name and Address of New Registered Agent
FR	ese, gary b			81	Name	
930 SOUTH HARBOR CITY BLVD.				82	Ctroot /	Address (P.O. Box Number is Not Acceptable)
SUITE 505				02	Street	Address (P.O. Box Number is Not Acceptable)
MELOURNE FL 32901				83		
				ļ		
Ì				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508	Florida Statutes	the above	a-named	
office or r	egistered agent, or both, in the Sta	te of Florida, Such	change was au	thorized by	the corp	corporation submits this statement for the purpose of changing its registered location's board of directors. I hereby accept the appointment as registered
	m tarninar with, and accept the ob-	igations of, Section	607.0505, Florid	da Statutes	3.	
SIGNATURE	Signature, typed or printed name of registered r	Could need this of produced by	(6)(3)(. 7	Desirtand An	at simulation	required when reinstating) DATE
12.		ND DIRECTORS	(MC/IE)	13.	an signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE	1	Change Addition
NAME	JOHNSON, ROBERT L JR	_		1.2 NAME	[
STREET ADDRESS	4044 000000 0010 111 0110 110			1.3 STREET	ADDRESS	
CITY - ST - ZIP	PALM BAY FL 32905	10.116				
TITLE	Trem bit te dedo		DELETE	1.4 CITY - S 2.1 TITLE	I-ZIP	☐ Change ☐ Addition
NAME		L-	_ better			Change C Addition
STREET ADDRESS				2.2 NAME		
J í				23 STREET		
CiTY-SI-ZIP			DELETE	2. 4 City-S 3.1 Title	SI - ZIP	Change Addition
NAME		Ļ	DECLIE		l	Change Addition
				3.2 NAME	ļ	
STREET AODRESS				3.3 STREET		
CITY-ST-ZIP			Torrere	3.4. CITY - 5	ST-21P	
TITLE		L.	DELETE	4.1 TITLE	l	☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S	T-ZIP	
TITLE		Ł	DELETE	5.1 TITLE		Change Addition
NAME				5 2 NAME		
STREET ADDRESS				53 STREET	ADDRESS	
CITY-S1-ZIP				5.4 CITY-S	T-ZIP	•
TITLE			DELETE	61 TITLE		☐ Change ☐ Addition
NAME				62 NAME		
STREET ADDRESS				63 STREET	ADDRESS	
CITY-ST-ZIP				64 CITY-S		
				<u> </u>	1	

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 any acquired or supplemental agreements are used 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 coporation or the receiver or divisor, empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 to charter on on an attrictment districts.

SIGNATURE:

empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address.