

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

APPROVED
AND
FILED
98 AUG -5 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000063667 (4)**

1. Corporation Name
FIRST CHOICE AUTOMOBILES, INC.



Principal Place of Business

**10630 N. 56TH ST., STE. 200
TAMPA FL 33617**

Mailing Address

**10630 N. 56TH ST., STE. 200
TAMPA FL 33617**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/23/1997

4. FEI Number

59-3523964

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$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

2. Principal Place of Business

21 11900 N. Florida Avenue
Suite, Apt. #, etc.

22
City & State
Tampa, Florida

23
Zip Country
33612 U.S.A.

2a. Mailing Address

26 400 N. Tampa Street
Suite, Apt. #, etc.

27
City & State
Tampa, Florida

28
Zip Country
33602 U.S.A.

9. Name and Address of Current Registered Agent

**HODGES, GEOFFREY T
400 N. TAMPA ST., STE. 2630
TAMPA FL 33602**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not ~~*****~~ **8.75 *****8.75**)
83 **200002611012--0**
84 City
-08/07/98--01087--025
FL *550.00 ***28550.00**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **MUSOLINO, FRANK**
STREET ADDRESS **10630 N. 56TH ST., STE. 200**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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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 **D, S** ☐ Change ☐ Addition
1.2 NAME **Frank Musolino**
1.3 STREET ADDRESS **10630 N. 56th St., Suite 200**
1.4 CITY-ST-ZIP **Tampa, Florida 33617**

2.1 TITLE **D, P** ☐ Change ☐ Addition
2.2 NAME **Maximilian Alba**
2.3 STREET ADDRESS **400 N. Tampa Street, Suite 2630**
2.4 CITY-ST-ZIP **Tampa, Florida 33602**

3.1 TITLE **D, V** ☐ Change ☐ Addition
3.2 NAME **Bobby N. Butts**
3.3 STREET ADDRESS **400 N. Tampa Street, Suite 2630**
3.4 CITY-ST-ZIP **Tampa, Florida 33602**

4.1 TITLE **D, T** ☐ Change ☐ Addition
4.2 NAME **Thomas L. Cummings**
4.3 STREET ADDRESS **400 N. Tampa Street, Suite 2630**
4.4 CITY-ST-ZIP **Tampa, Florida 33602**

5.1 TITLE **Assistant Secretary** ☐ Change ☐ Addition
5.2 NAME **Geoffrey Todd Hodges**
5.3 STREET ADDRESS **400 N. Tampa Street, Suite 2630**
5.4 CITY-ST-ZIP **Tampa, Florida 33602**

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:

[Handwritten signatures and dates]
8/5/98 612-225-1515

CR2E034 (5/98)

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