

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

May 05 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 # P 97000064658
1. Corporation Name:
PINE ISLAND MOTOR SALES, INC.

Principal Place of Business Mailing Address
1711 BROWN ROAD SAME
N. FORT MYERS, FL. 33903

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt., Etc. 26 Suite, Apt., Etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
7/24/1997

4. FEI Number
65-0770111

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 and I understand the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: 4/1/98

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY, ST, ZIP

PRESIDENT, SECTY, & TREAS ☐ DELETE
RENO RIZZO
15460 KILMARNOCK DRIVE
FORT MYERS, FL 33912

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TITLE NAME STREET ADDRESS CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP

PRESIDENT, SECTY & TREAS ☐ Change ☐ Addition
RENO RIZZO
15460 KILMARNOCK DRIVE
FORT MYERS, FL 33912

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 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 registered or designated empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or in any attachment with an address.

SIGNATURE: [Signature] DATE: 4-25-98 1997-98

CR2E034 (10/97)