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

PROFIT CORPORATION ANNUAL REPORT

1998

John T. INglis

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P97000065574 (0)

AUTOPAX, INC.

Principal Place of Business
#18 PARKWAY PLAZA, 810 SATURN STREET

Mailing Address

#18 PARKWAY PLAZA, 810 SATURN STREET

FILED Apr 21 1998 8:00am Secretary of State



as required by Chapter 607, Florida Statutes, and that my name appears in

4/01/98

[	PERICAL SOULS				DO NOT WRITE IN THIS SPACE		
ĺ					3. Date Incorporated or Qualified		
					07/29/1997		
2. Principal f	Place of Business	2a. Mailing Addres	ss		4. FEI Number	Applied For	
21	26				36-2897540	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
27				Fee Required			
City & State City & State				6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country Zip Country			8. This corporation owes or has paid the curre			
24	[25]	29	[30]		<u> </u>	Yes No	
L	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered A	gent	
į ine	glis, John T		81	Name			
#18 PARKWAY PLAZA, 810 SATURN STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
JUPITER FL 33477							
				83			
			84	City		85 Zip Code	
ĺ			1 1	•	FL	1 1	
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida	Statutes, the above	named corp	poration submits this statement for the purpose of construction of directors. I hereby accept the apporage of the support of t	hanging its registered	
office or agent 1 a	registered agent, or both, in the Sta am familiar with, and accept the obli	te of Fiorida. Such change gations of, Section 607.0!	e was authorized by t 505. Florida Statutes.	tne corporat	ion's board of directors. I hereby accept the appo	intment as registered	
SIGNATURE	, , , , ,	•					
SIGNATURE	Signature typed or printed harm of registered a	gent and title if applicable	(NCI16 Registered Agent	signature requir	ed when reinstating) DATE		
12,	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D DELETE		TE 1.1 TITLE	1	L	Change Addition	
NAME	INGLIS, LU C		1.2 NAME	Ì			
STREET ADORESS	#18 PARKWAY PLAZA, 810 SATURN STREET		1.3 STREET A	DDRESS			
CITY-ST-ZIP	JUPITER FL 33477		1.4 CITY-ST-	ZIP			
TITLE	D	☐ DELI	TE 21 TITLE			Change Addition	
NAME	INGLIS, JOHN T						
STREET ADDRESS	#18 PARKWAY PLAZA, 810 SATURN STREET			.DDRESS			
CITY-ST-ZIP	JUPITER FL 33477		2. 4 CITY - ST	- ZIP			
TITLE			TE 31 TITLE	7		Change Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	DORESS			
CITY-ST-ZIP			3.4. CITY-ST	- ZIP			
TITLE	☐ DELETE 4		TE 41 TITLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET A	DDRESS			
CITY-ST-ZIP			4.4 CITY - ST-	ZIP			
TITLE	DELETE		TE 51 TITLE	1 TITLE		Change Addition	
NAME			5.2 NAME	1			
STREET ADDRESS	]		5.3 STREET A	DDRESS			
CITY-ST-ZIP	[		54 CITY-ST-	ZIP			
TITLE		☐ DETE				Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET A	DDRESS			
CITY-ST-ZIP			6.4 CITY - ST-				
	contry that the information europlied	with this filing does not a			Section 119.07(3)(i), Florida Statutes. I further cert	ify that the information	