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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000072829**1. Corporation Name

J.T.'S USED CARS INC.

Principal Place of	Business
1570 CARRINGTON	AVENUE

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90026 043 ***150.00



Principal Plac	ce of Business	N	lailing Address					e immitent lift iffill iffatt marti matt	#### BE(#) (B		()#() 0 (1)	
579 CARRINGTON AVENUE 1579 CARRINGTON AVENUE WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708						DO NOT WRITE IN THIS SPACE						
								Date Incorporated or Qualifed 08/21/1997				
2. Principal F	Place of Business	2a	. Mailing Address				4.	FEI Number		L	Appl	ied For
1		26						<u>59-3462985</u>			Not	Applicable
Suite, Apt	. #, etc.	27	Suite, Apt. #, etc.	Suite, Apt. #, etc.				Certifcate of Status Desired		•	. 75 Ad ee Req	lditional uired
City & Sta	ate	28	City & State				6.	Election Campaign Financing Trust Fund Contribution			.00 M	
Zip	Country 25	29	Zip 30	Cour	ntry		8.	This corporation owes the currer Personal Property Tax.		ngible Yes	s)	No
-1	9. Name and Address of Curren	t Regi	stered Agent				10.	Name and Address of New Re	gistered A	gent		
					81	Name		· · · · · · · · · · · · · · · · · · ·				
THAW, JOEL M 1579 CARRINGTON AVENUE WINTER SPRINGS FL 32708			}	82	Ctunet A	Address (P.O. Box Number is Not Acceptable)						
			İ	82	Street A	Haaress (r	F.O. Box Number is Not Acceptate	10)				
				83					,			
					84	City			FL	85	Zip Co	ode
												-1-4
office or	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Flori	ida. Such change was auth	onzed	DV.	tne corpoi	corporatio oration's b	n submits this statement for the poard of directors. I hereby accept	the appoin	:nangii tment	ng its re as regi:	egistered stered
SIGNATURE									DATE			
	Signature, typed or printed name of registered ager			13.	Agen	: signature rec	equired when	ADDITIONS/CHANGES TO OFF		O DIBI	ECTOR	S IN 12
12.	OFFICERS AN	אום ם	DELETE	1.1 TIT		$\overline{}$		ADDITIONS/CHANGES TO OFF	CEINO AIN	Chi		Addition
TITLE	D TOTAL TOTAL		- DELETE									
NAME	THAW, JOEL M			1.2 NA	ME							

- 0					
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Agent signature re	equired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	THAW, JOEL M	1.2 NAME			
STREET ADDRESS	1579 CARRINGTON AVENUE	1.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER SPRINGS FL 32708	1.4 CITY-ST-ZIP			
TITLE	D DELETE	2.1 TITLE		Change	☐ Addition
NAME	THAW, JANIS	2.2 NAME			
STREET ADDRESS	1579 CARRINGTON AVENUE	2.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER SPRINGS FL 32708	2.4 CITY-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME		4 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY- ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME		5.2 NAME		•	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP	·	5,4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME		6.2 NAME			ı
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		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, with another light empowered.