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 # P97000086055 (5)

ROSCOE AUTOMOTIVE, INC.

Principal Place of Business	Mailing Address				
15580 MCGREGOR BOULEVARD	15580 MCGREGOR BOULEVARD				
FORT MYERS FL 33908	FORT MYERS FL 33906				

FILED Jan 22 1998 8:00am Secretary of State



15580 MCGREGOR BOULEVARD FORT MYERS FL 33908			15580 MCGREGOR BOULEVARD FORT MYERS FL 33908				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						1	0/06/1997		90		
2. Principal P	Place of Business	2a. Mailing A	Address				I Number			Ar	plied For
21		26				6	5 -0°	18539	8	No	t Applicable
Suite, Apt.	#, etc.	Suite, An	Suite, Apt. #, etc.			5. Ce	ertificate of S	Status Desired			Additional equired
City & State	6	City & St	ate				ection Camp ust Fund Co	aign Financing ntribution	g	\$5.00 Added	May Be to Fees
Zip	Country	Zıp		Countr	/	8. Th	is corporation	on owes or has	paid the cu	rrent year Int	angible
24	25 29 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent						
	9. Name and Address of Co	urrent Registered Age	ent	B1	Name	· · · · · · · · · · · · · · · · · · ·	ame and Ad	dress of New	Registered	Agent	
	ISANTE, WILLIAM F			[0,	IValle	9					
1	57 PINE TREE DRIVE			62	Stree	t Address (P.O.	Box Numbe	er is Not Accep	otable)		
SA	Ni be l Fl 33957			63	 						
										···	
				84	City				FL	85 Zip	Code
office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the immfamiliar with, and accept the common sections of the common section	State of Florida. Such o	change was a	authorized b	y the co	d corporation s orporation's boa	ubmits this s rd of directo	statement for thirs. I hereby ac	ne purpose o ocept the app	f changing it pointment as	s registered registered
SIGNATURE	Signature, typed or printed name of register	ed epent and title if applicable.	(NOTE	E Registered Ag	ont signatu	ire required when rein	nstating)		DATE		
12.		S AND DIRECTORS		13.		ADI	DITIONS/CH	ANGES TO OF	FFICERS ANI	DIRECTOR	S IN 12
TITLE			DELETE	1.1 TITLE		P	_			☐ Change	Addition
NAME				1.2 NAME		WILLIA	m F,	MUSQ WTA	<u> </u>		
STREET ADDRESS				1.3 STAEE	I ADDRESS	, , , ,					
CITY-ST-ZIP	<u> </u>	· · · · · · · · · · · · · · · · · · ·	l ne ese	1.4 CITY-	ST-ZIP	SANIBE	- FL	33950		D 01	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
TITLE				2.1 TITLE						☐ Change	☐ Addition
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREE 2. 4 CITY-	r adoress	`					
CITY-ST-ZIP TITLE	DELETE 3.1 TI									Change	Addition
NAME	320									_ `	
STREET ADDRESS					r address	,					
CITY-ST-ZIP				3.4. CITY-	ST-ZIP						
TITLE	DELETE 4.1 To									Change	Addition
NAME				4. 2 NAME							
STREET ADDRESS	•			4.3 STREE	FADDRESS	; -					
CITY-ST-ZIP				4.4 CITY -	ST-ZIP						
TITLE				5.1 TITLE						Change	Addition
NAME				5.2 NAME							
STREET ADDRESS					i address						
CITY-ST-ZIP	<u> </u>	<u> </u>	DELETE	5.4 CITY - : 6.1 TITLE	ST-ZIP					Change	Addition
TITLE		L.) DITTE	6.2 NAME						The Analities	Addition
NAME STREET ADDRESS					F ADORESS						
CITY-ST-ZIP				6.4 CITY - :		` 					

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 suppliemental 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.

1/12/90 911.420-11/6