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

POCUMENT # P97000091526 (8)

SUNWET CAR CARE CENTER, INC.

Principal Place of Business 4124 MADURA SEVEN

Mailing Address

FILED Mar 10 1998 8:00am Secretary of State



4124 MADURA SEVEN GULF BREEZE FL 32561 **GULF BREEZE FL 32561** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3051 BUIF BREEZE PKWY B1-3473224 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be BREEZE Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible 25 SWIN RUSA Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ARDIZZONE, JERRY R Name 4124 MADURA SEVEN Street Address (P.O. Box Number is Not Acceptable) **GULF BREEZE FL 32561** 83 84 City 85 Zip Code 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE DIVITIS Change Addition ARDIZZONE, JERRY R NAME 1.2 NAME 4124 MADURA SEVEN 1.3 STREET ADDRESS STREET ADDRESS **GULF BREEZE FL 32561** 1.4 CITY-ST-ZIP CITY-S1-ZIP DELETE Addition TITLE 2.1 TITLE Change KASLER, JAMES F NAME 2.2 NAME 4123 MADYEA ROAD 4123 MADURA SEVEN STREET ADDRESS 2.3 STREET ADDRESS **GULF BREEZE FL 32581** BUIF BLEEZE, FL 32561 CITY-ST-ZIP 2. 4 CITY - ST - ZiP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Addition 5.1 TITLE ☐ Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 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 t 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 or an attactoment with an address.

SIGNATURE:

JERRY R. AND LEONE VICE-PRES 3/3/98 (850)934-6387