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

PROFIT COÉPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000093378 (2)

Principal Place of Business	Mailing Address	
1325 LIME AVENUE SARASOTA FL 34237	1325 LIME AVENUE SARASOTA FL 34237	

FILED Mar 02 1998 8:00am Secretary of State

WEST	SHORE AUTO SALES, IN	C		1 (2014 CD) 124 10121 10011 2011 2011 2011 2011 201	
İ			-		
Principal Plac	e of Business	Mailing Address			
1325 LIME A	VENUE	1325 LIME AVENUE			
SARASOTA F	L 34237	SARASOTA FL 34237		DO NOT WRITE IN THIS SPACE	
1				3. Date Incorporated or Qualified	
				10/30/1997	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		45-063 6054 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CR 75 Additional	
22		27		Certificate of Status Desired Fee Required	
City & Stat	e	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 current year intangible	
24	25		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
	ITTEL, JOHN D 25 LIME AVENUE				
	RASOTA FL 34237		82 Street	Address (P.O. Box Number is Not Acceptable)	
%	NAOUIN FL 04201		83		
ļ					
			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	s, the above-named		
office or r	registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida. Such change was au ligations of, Section 607,0505, Flor	uthorized by the cou rida Statutes.	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	, , , , , , , , , , , , , , , , , , , ,				
	Signature, typed or printed name of registered			re required when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		☐ DELETE	1,1 TITLE	Presinent Change Addition	
NAME			1.2 NAME	JUHN D. CATTEL 1325 Lime Ave	
STREET ADDRESS			1.3 STREET ADDRESS	LUVALOW LEC 34739	
CITY-ST-ZIP TITLE	·	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition	
NAME		_ occur	2.2 NAME	- Change - Action	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			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 DITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Addition	
NAME			5.2 NAME	//k 2/\	
STREET ADDRESS			5.3 STREET ADDRESS	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
CITY-ST-ZIP		☐ DELETE	5.4 CITY - ST - ZIP	Change Addition	
TITLE		☐ Dereig	6.1 TITLE	700002444417 Change Li Adollion	
NAME OTRECT ADDRESS			6.2 NAME	700002444417 -03/02/9801125016	
STREET ADDRESS			6.3 STREET ADDRESS	***158.75	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	<u> </u>	

14. Thereby 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 chapted, or on an attachment with an address.

2/23/98

941-364-9994