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 # **P97000093378**

1. Corporation Name

WEST SHORE AUTO SALES, INC

Principal Place of Business

Mailing Address

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90132 014 ***158.75



5 LIME AVENUE 1325 LIME AVENUE RASOTA FL 34237 SARASOTA FL 34237			DO NOT WRIT	DO NOT WRITE IN THIS SPACE	
		_	3. Date Incorporated or Qualifed 10/30/1997		
2. Principal Place of Business	2a. Mailing Address 26 1372 BAY HA	LIBUL DA.	4. FEI Number 65-0536054		Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	ACIDAL ISSUE	Certificate of Status Desired		8.75 Additional Fee Required
City & State 3 PALM HALBUR FL	28 PALM HANBUM	, FL	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip Country 4 3 4685 25 45 A	Zip Zip Co	untry USA	This corporation owes the curre Personal Property Tax.		ible Yes Dino
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
CATTEL, JOHN D 1325 LIME AVENUE		82 Street Addre	TTEC, JOHN D. ss (P.O. Box Number is Not Accepta B A Y HARBON DAID		
SARASOTA FL 34237		83 APT L	3-201		
		84 City PALM	n HARBOR	FL	Zip Code 3 4 6 8 5
 Pursuant to the provisions of Sections 607.050. office or registered agent, or both, in the State agent. I am familiar with, and appear the obligat 	of Florida. Such change was authorize	d by the corporation	ration submits this statement for the 's board of directors. I hereby accep	purpose of cha t the appointme	ent as registered

2/13/99 SIGNATURE (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Addition JOHN D. 1.1 TITLE CATTEL, TITLE 1372 BAY HALBON DAIDL # 13-201 CATTEL, JOHN D 1.2 NAME NAME 1325 LIME AVENUE 13 STREET ADDRESS STREET ADDRESS Hanbon, FL PALM SARASOTA FL 34237 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition T DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 61 TILE ☐ Change DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 of 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 changes, or or a stackment with an address, with all other like empowered. officer or director of the corporation Block 12 or Block 13 if changed, or

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

CR2E034 (11/98)