## 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 # P97000095015 (8)

FILED
Jan 27 1998 8:00am
Secretary of State

Principal Pla 5732 NORW UNIT 4 JACKSONVI	ACCESSORY SHOP, INC.  ce of Business  MANDY BLVD  ILLE FL 32205  Place of Business  ##. etc.	Mailing Address 5732 NORMANDY BLV( UNIT 4 JACKSONVILLE FL 322  28. Mailing Address 26 Suite, Apt. #, etc.				DO NOT WRITE IN THE  3. Date incorporated or Qualified  11/05/1997  4. FEI Number  59-347-9972	S SPACE	pplied For ot Applicable
City & Sta	nte .	27 City & State	City & State			Certificate of Status Desired     Status Desired	Fee Ro	equired
23		28				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country					8. This corporation owes or has paid the c		
[24]	25 9, Name and Address of Curre	29   ont Registered Agent	30			Personal Property Tax due June 30.  10. Name and Address of New Registered		_ No
T	ATUM, JAMES L		8	1 Name	· · · · · · · · · · · · · · · · · · ·	Tallio and Addition of their Indiana		
	732 NORMANDY BLVD		_					
UNIT 4			8	82 Street Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE FL 32205			8	3				
			8	4 City			lec Zin	Code
						FI	L.     '	
11. Pursuant office or	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statu	tes, the abo	ve-name	d corpora	tion submits this statement for the purpose s board of directors. I hereby accept the ap	of changing it	ts registered
agent. I s	am familiar with, and accept the oblig	ations of, Section 607.0505, Fi	orida Statut	es.	, poration.	s board or an octors. Thoroby docopt this ap	pointment as	registered
SIGNATURE								
12.	Signature, typed or printed name of registered ac OFFICERS AN	POR and tille II applicable (NO:	F: Registered A	gent signatur	re required w	hen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTOR	- IN 40
TITLE	D DELETE		1.1 TITLE		1	ADDITIONA/CHANGES TO OTTICERS AS	Change	Addition
NAME	TATUM, JAMES L		1.2 NAME					
STREET ADORESS	5732 NORMANDY BLVD, U	NIT 4	1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32205		1.4 CITY	ST-ZIP				
TITLE	D	DELETE	2.1 TITLE			¥ .	☐ Change	Addition C
NAME	TATUM, BERNICE		2.2 NAME					ŀ
STREET ADDRESS	5732 NORMANDY BLVD, UN	NT 4	2.3 STREI	ET ADDRESS				l
CITY-ST-ZIP	JACKSONVILLE FL 32205	T priese	2.4 CITY		1			
TITLE		☐ DELETE	3.1 TITLE		1		Change	☐ Addition
NAME OTDECT ADDRESS	1		3.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE	DELETE		3.4. CITY 4.1 TITLE	3.4. CITY-ST-ZIP			Change	Addition
NAME	<u> </u>		4. 2 NAM	:			orange	L. Xddilloll
STREET ADDRESS			1	T ADDRESS	1			
CITY-ST-ZIP			4.4 CITY-					
TITLE	···	DELETE	5.1 TITLE	JI-ZH			Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CiTY-					
TITLE		DELETE	6.1 THLE		<del> </del>		☐ Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP				ST-ZIP				
14. I hereby o	certify that the information supplied w	ith this filing does not qualify for	or the exemi	ntion state	ed in Sec	tion 119 07(3)(i) Florida Statutes, Lfurther o	ortify that the	information

Interest extracting that the information supplies with instilling does not quality for the exemption stated in Section 119.07(3)(j), 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 correlation 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.