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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9700095921 (7)

FILED Jan 22 1998 8:00am Secretary of State

1. Corporatio	NUTO SALES, INC.	1095921 (7)			
Principal Plac	e of Business	Mailing Address			NE MOTOR OFFICE STABLE FOR LINES
15216 US HWY, 19 N. 15216 US HWY, 19 N. HUDSON FL 34667 HUDSON FL 34667				DO NOT WRITE IN THIS	COACE
				3. Date Incorporated or Qualified	
				11/10/1997	}
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1521	16 11519 Nath	28 SAMe		118467728	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	None	27 Mone		6. Certificate of Status Desired	Fee Required
City & Stat		City & State	•	6. Election Campaign Financing	\$5.00 May Be
23 HU	SOM + L	28 HUDSON		Trust Fund Contribution	Added to Fees
Zip 35-1(167 25 PASCO	29 34667	Country 30 PASCO	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible
241 3 1	9, Name and Address of Current		1175LU	10. Name and Address of New Registered	
O'CONNOR, PATRICK M				E10000 10 1-	1 00
40407 H.C. LINAV. 40 MODITAL CITE 450				Jannor ratio	111
CLEARWATER FL 34624			82 Street Add	liess (P.O. Box Number is Not Acceptable)	L STE150
83			83)	
84 City ///					OF Fin Code
V_{0}				parrialu & FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the pursose of changing its registered office or registered agent, or both, in the State of Florida, Sugar 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 Statutes.					
SIGNATURE	complete	Della		4///8	
Signature, typod or printed name of registered agent and little if applicable (NOTE Registere 12. OFFICERS AND DIRECTORS 13.			Registered Agent signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 10
TIFLE	D OFFIGERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	DEBELLO, NICHOLAS		1.2 NAME		
STREET ADDRESS	7459 OAK TREE LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL 34607		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
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		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		El ousside El vanition
STREET ADDRESS			5.3 STREET ADDRESS		į
Dilice HODILGO			are direct unpulces		i i

64 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 I am an officer or director of the proporation 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 any attachment with an address

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

61 THILE

6.2 NAME

SIGNATURE:

title Name

STREET ADDRESS

archula VISOUT

DELETE

(1/98 (8/3)8

(813)868 4799 (352) 597964

Change

Addition