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

Mailing Address

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthym

Secretary of State DIVISION OF CORPORATIONS

1998

Principal Place of Business

DOCUMENT # P97000102975 (4)

SOUTHERN TIRE AND AUTO, INC.

PERRY, PATRICIA

5241 SOUTHERN BOULEVARD

WEST PALM BEACH FL 33415

5241 SOUTHERN BOULEVARD 5241 SOUTHERN BOULEVARD WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/04/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-1805918 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Źιρ Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LAMPERT, JEFFREY B 6080 OKEECHOBEE BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SUITE C WEST PALM BEACH FL 33417 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) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change ☐ Addition PERRY, PHILIP E NAME 1.2 NAME 5241 SOUTHERN BOULEVARD STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33415 CITY-ST-ZIP 1.4 CITY - \$1 - 7IP DELETE TITLE Change Addition 2.1 TIFLE

2.2 NAME

3 1 TIFLE

4.1 TIFLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

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2.3 STREET ADDRESS

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5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

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3.4. CITY-ST-ZIP

2 4 CITY-ST-ZIP

CITY-ST-ZIP 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 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 changed, or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

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4-27-98

(561) 688-9 del

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**FILED** 

Jun 04 1998 8:00am

Secretary of State

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