

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P97000106141 (9)**

1. Corporation Name

AUTOMOTIVE REMARKETING, INC.

Principal Place of Business

**871 E TENNESSEE ST
TALLAHASSEE FL 32308**

Mailing Address

**8601 DUNWOODY PLACE, SUITE 406
ATLANTA GA 30350**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/17/1997

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip Country

29 **30**

4. FEI Number

58-2361506

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE **Director** ☐ DELETE
NAME **Roderick Aycox**
STREET ADDRESS **8601 Dunwoody Pl., Ste 406**
CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **Director** ☐ DELETE
NAME **Robert Reich**
STREET ADDRESS **8601 Dunwoody Pl, Ste 406**
CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **President & Treasurer** ☐ DELETE
NAME **George Quinn**
STREET ADDRESS **8601 Dunwoody Pl., Ste 406**
CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **V.P. and Seretary** ☐ DELETE
NAME **Mark Hamilton**
STREET ADDRESS **8601 Dunwoody Pl., Ste 406**
CITY-ST-ZIP **Atlanta, GA 30350**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

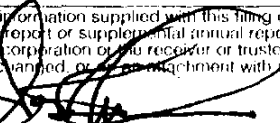
6.2 NAME

6.3 STREET ADDRESS

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 in the assignment with an address.

SIGNATURE:

 **George T. Quinn, President**

2/6/98

CR2E034 (10/97)