SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000107156 (6)

PETER'S ROAD AUTO SERVICE, INC.

FILED Sep 17 1998 8:00am Secretary of State



Sulte, Apt. #, etc. Status Desired \$8.75 Additiona Fee Required						
PLANTATION FL 33317 PLANTATION FL 33317 PLANTATION FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1997 4. FEI Number 4. FEI Number 5. Certificate of Status Desired Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State 28 Zip Country Zip Country Zip Country Zip Country 30 30 9. Name and Address of Current Registered Agent HATZIVASSILIOU, STEPHANOS 1211 SOUTH STATE ROAD PLANTATION FL 33317 81 Name 10. Name and Address of New Registered Agent 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 agent agent. I am familiar with, and accept the obtigations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tine # applicable (NOTE Registered Agent Agent Application printed name of registered agent agent and tine # applicable (NOTE Registered Agent Application printed name of registered agent agent and tine # applicable (NOTE Registered Agent Applitons/CHANGES TO OFFICERS AND DIRECTORS IN 1. Applitons/CHANGES TO OFFICERS AND DIRECTORS IN 1.	Principal Plac	ce of Business	Mailing Address			T (SATION) (40 IDIII 100) I BDAID OGINI ODAN 1901: BOIN (DDAN 1100) DIIIR AINI 16
2. Principal Place of Business 2. A Mailing Address 2. Principal Place of Business 2. Principal Place of Business 2. A Suite, Apt. #, etc. 2. City & State 2. Country 2. To Country 2. To Country 2. To Country 2. To Country 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 3. Name and Address of Now Registered Agent 4. FEI Number 5. Certificate of Status Desired				1211 SOUTH STATE ROAD		DO NOT WRITE IN THIS SPACE
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Suite, Apt. #, etc. Suite, Apt. #, etc.			26			65-080,5646 Not Applicat
City & State Country Solution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Year No 9. Name and Address of Current Registered Agent HATZIVASSILIOU, STEPHANOS 1211 SOUTH STATE ROAD PLANTATION FL 33317 81 Name City Country 82 Street Address (P.O. Box Number is Not Acceptable) 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 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 1:	22		h- n	h		5. Certificate of Status Desired S8.75 Additional Fee Required
Zip Country Zip Country Zip Country 25 30 30 8. This corporation owes or has peld the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HATZIVA\$SILIOU, STEPHANOS 1211 SOUTH STATE ROAD PLANTATION FL 33317 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 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 NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:	City & Stat	le				
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PLANTATION FL 33317 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 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	HAT	ZIVASSILIOU, STEPHAN	OS	•"	Name	
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Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.	office or	registered agent or both is	the State of Florida. Such change was a	authorized b	v the corp	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
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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	CITY-ST-ZIP TITLE NAME		[_] DELETE	6.1 TITLE 6.2 NAME 6.3 STREE	TADDRESS	Change Addit

indicated on this annual report or supplied with this niting does not quality for the exemption stated in section 1 19.0 (5)(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 of 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.

09/10/98