FILE NOW: FILING FEE AFTER MAY 1ST IS \$550 00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000023198

VALUE PLUS AUTO SALES, INC.

Principal Place of Business	Mailing Address	
8021 4TH STREET, NORTH	8021 4TH STREET, NORTH	
ST. PETERSBURG FL 33702	ST. PETERSBURG FL 33702	

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90186 037 ***150.00



ST. PETERSBUR		ST. PETERSBURG FL 33702			b or			
					DO NOT WRITE IN THIS SPACE			
		•			3. Date Incorporated or Qualifed 03/11/1998			
2. Principal Pl	lace of Business	2a. Mailing Address			4, FEI Number		A	pplied For
21		26			59-3502	645	N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional equired
22		City & State			a Election Commission Financian			
City & Stat	e	28	,		Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Country		8. This corporation owes the curre			
24	25	29 30	0		Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered A	gent	
			81	Name				
CAVANAUGH, STEPHEN G 8021 4TH STREET, NORTH		82	Street A	Address (P.O. Box Number is Not Acceptable)				
	PETERSBURG FL 33702		83					
			84	City		FI	85 Zip	Code
				<u> </u>		F L	l l	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was auth	norized by	the corpor	orporation submits this statement for the ation's board of directors. I hereby accept	t the appoin	tment as re	egistered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Agei	nt signature rec	juired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.	-	ADDITIONS/CHANGES TO OF	ICERS AN	DIRECTO	ORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE				Change	Addition
NAME .	CAVANAUGH, STEPHEN G		1.2 NAME	(•			i
STREET ADDRESS	9942 12TH WAY NORTH, #108	•	1.3 STREE	ADDRESS				1
CITY-ST-ZIP	ST. PETERSBURG FL 33716		1.4 CITY-S					
TITLE	51. 1 2. c. 155611. 1 2 3 5 1 3	☐ DELETE	2.1 TITLE	1-20			☐ Change	Addition
NAME		_	2.2 NAME					
				TADORESS		•		
STREET ADDRESS				1	•			
CITY-ST-ZIP		☐ DELETÉ	2, 4 CITY-5 3,1 TITLE	SI-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
TITLE	·		3.2 NAME	- 1				_
NAME			1					
STREET ADDRESS			B.	ADDRESS				
CITY-ST-ZIP		DELETE	3.4. CITY-5	T-ZIP			Change	Addition
-ⅢÆ ===><===		LIUELE IE	4.1.TITLE	1		* ±	criango	- C
NAMÉ			4.2 NAME	1				
STREET ADDRESS			4.3 STREE	TADDRESS				i
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE	ļ	,		Change	Addition
NAME			5.2 NAME		•			
STREET ADDRESS		,		TADORESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			<u>, </u>	
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME		•	6.2 NAME					
-			AA CYDEE	LADDDECC				1

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, with all other like empowered.

SIGNATURE: