

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

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90113 029 ***150.00

DOCUMENT # P98000049701

1. Corporation Name

MOSQUITOS AUTO SALES, INC.



Principal Place of Business

204 CENTURY 21 BLVD.
JACKSONVILLE FL 32216

Mailing Address

204 CENTURY 21 BLVD.
JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1998

4. FEI Number

59-3555 730

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 204-C CENTURY 21 DR
Suite, Apt. #, etc.

26 204-C CENTURY 21 DR
Suite, Apt. #, etc.

22 City & State
JAX, FL

27 City & State
JAX, FL

23 Zip Country
32216 USA

28 Zip Country
32216 USA

9. Name and Address of Current Registered Agent

CRABTREE, R R
8375 DIX ELLIS TRAIL SUITE 401
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name JOHN D. TIPTON

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

204 CENTURY 21 DR

83

84 City JAX

FL

85 Zip Code 32216

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.

JOHN D. TIPTON

PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

03-12-99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME TIPTON, JOHN D
STREET ADDRESS 204 CENTURY 21 BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME PAUL N. DEESE
1.3 STREET ADDRESS 204-C CENTURY 21 DR
1.4 CITY-ST-ZIP JAX, FL 32216

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 on an addition block, with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-12-99

904571 3368

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #