PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000062491

1. Corporation Name

ABSOLUTE AUTOMOTIVE, INC.

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90113 047 ***150.00



Principal Place	e of Business	Mailing Address				A LANGTINGUE FOR SALES COURT AND SECURI AND SECURITARIAN AND SECURITARIA AND SECURITARIAN A	ATER ATTEN TION OFFICE	(fill), man radi
1250 OGDEN ROAD SUITE C 1250 OGDEN ROAD SUITE C VENICE FL 34292 VENICE FL 34292					į	DO NOT WRITE IN T	HIS SPACE	
						3. Date Incorporated or Qualifed		
and the second s				المر <u>ائ</u> ية المراثق		07/15/1998	۰۰ سے سے	J
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26			,	65-0860334	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	
22		27				5. Certificate of Status Desired	Fee Re	quired
City & State	e	City & State				6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added (to Fees
Zip	Country	Zip	Coun	ntry		8. This corporation owes the current year		
24	25		30			Personal Property Tax.	rad Agent	
	9. Name and Address of Current	Registered Agent	 +	81	Name	10. Name and Address of New Register	red Agent	
EVE.	TT INCHINA I			۱,	Maille			
FAETT, JOSHUA J 4280 E. TAMIAMI TRAIL SUITE 204 NAPLES FL 34112				82	Street Addres	ress (P.O. Box Number is Not Acceptable)		
			}	83				
THAI	LEO I E OTTIE			•				
				84	City		EL 85 Zip (Code
11 Purcuant	to the provisions of Sections 607.0503	and 607 1508 Florida Statute	s the ab	HOVE-I	named comor	ration submits this statement for the purpose	e of changing its	registered
office or r	registered agent, or both, in the State of	of Florida. Such change was au	thorized	by th	e corporation	's board of directors. I hereby accept the ap	ppointment as re	gistered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Fiori	da Statu	tes.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered A	Agent s	ignature required v	when reinstating) DATE		· {
12.	OFFICERS ANI		13.	•		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITL	LE			Change	Addition
NAME	OLSON, JOHN T JR.		1.2 NA	ΜE	-			
STREET ADDRESS	1250 OGDEN RD. SUITE C		1.3 STF	REETA	DDRESS (
STREET ADDRESS CITY-ST-ZIP	1250 OGDEN RD. SUITE C VENICE FL 34292		1.3 STF			_		
STREET ADDRESS CITY-ST-ZIP TITLE	1250 OGDEN RD. SUITE C VENICE FL 34292	☐ DELETE		Y-ST-2			Change	Addition
CITY-ST-ZIP		☐ DELETE	1.4 CIT	Y-ST-2 LE			☐ Change	Addition
CITY-ST-ZIP TITLE	VENICE FL 34292	☐ DELÉTE	1.4 CIT 2.1 TITL 2.2 NAJ	Y-ST-Z LE ME			Change	Addition
CITY-ST-ZiP TITLE NAME	VENICE FL 34292	□ DELETE	1.4 CIT 2.1 TITL 2.2 NAJ	Y-ST-Z LE ME REET AL	DORESS		, .	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	VENICE FL 34292	☐ DELETE	2.1 TITL 2.2 NAJ 2.3 STF	Y-ST-Z LE ME REET AL	DORESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VENICE FL 34292		1.4 CIT 2.1 TITL 2.2 NAJ 2.3 STF 2.4 CIT	Y-ST-Z LE ME REET AI TY-ST-Z LE	DORESS		, .	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VENICE FL 34292		1.4 CIT 2.1 TITL 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAV	Y-ST-Z LE ME REET AL IY-ST-: LE ME	DORESS		, .	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITL 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAV	Y-ST-Z LE ME REET AL TY-ST-: LE ME REET AL	ZIP DORESS ZIP DORESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VENICE FL 34292		1.4 CIT 2.1 TITL 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAJ 3.3 STF	Y-ST-Z LE ME REET AL TY-ST-Z LE ME REET AL	ZIP DORESS ZIP DORESS		, .	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAJ 3.3 STF 3.4. CIT	Y-ST-Z LE ME REET AL TY-ST-; LE ME REET AL TY-ST-; LE	ZIP DORESS ZIP DORESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NAV 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA	Y-ST-Z LE ME REET AL IY-ST-Z LE ME REET AL IY-ST-Z LE	ZIP DORESS ZIP DORESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NAV 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAV 3.3 STF 3.4 CIT 4.1 TIT 4.2 NA 4.3 STF 4.4 CIT	Y-ST-Z LE ME REET AI IY-ST-, LE ME REET AI LE LE REET AI	DORESS ZIP DORESS ZIP DORESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.1 T	Y-ST-Z LE ME REET AI TY-ST-, LE ME REET AI TY-ST-, LE LE ME REET AI LE	DORESS ZIP DORESS ZIP DORESS		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAV 3.3 STF 3.4 CIT 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NAV	Y-ST-Z LE ME ME REET AI NY-ST-, LE ME ME REET AI NY-ST-, LE LE ME LE ME LE LE ME ME LE ME	DORESS ZIP DORESS ZIP DORESS ZIP		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAV 3.3 STF 3.4 CIT 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NAV 5.3 STF	Y-ST-Z LE ME ME REET AI REET AI REET AI LE LE ME LE LE ME LE ME ME REET AI REE	DORESS DORESS ZIP DORESS ZIP DORESS ZIP		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAV 3.3 STF 4.4 CIT 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NAV 5.3 STF 5.4 CIT	Y-ST-2 LE ME REET AI NY-ST-2 LE ME ME REET AI LE LE LE LE LE ME REET AI LE	DORESS DORESS ZIP DORESS ZIP DORESS ZIP		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAV 3.3 STF 4.1 TITU 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITU	Y-ST-2 LE ME REET AI LE ME REET AI LE ME ME REET AI LE ME ME REET AI LE ME LE ME LE ME	DORESS DORESS ZIP DORESS ZIP DORESS ZIP		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VENICE FL 34292	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITI 6.2 NAV	Y-ST-2 LE ME	DORESS DORESS ZIP DORESS ZIP DORESS ZIP		☐ Change	Addition Addition

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 changes, or an attachment with an address, with all other like empowered.

SIGNATURE: