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Apr 02, 1999 8:00 am  
Secretary of State

04-02-1999 90095 006 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000066823

1. Corporation Name

RAYRE AUTO SALES, INC.

Principal Place of Business

3545-1 ST JOHNS BLUFF RD S. SUITE #335  
JACKSONVILLE FL 32224

Mailing Address

3545-1 ST JOHNS BLUFF RD S. SUITE #335  
JACKSONVILLE FL 32224

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1998

2. Principal Place of Business

21 5350 Bayley Rd  
Suite, Apt. #, etc.

2a. Mailing Address

26 5350 Bayley Rd  
Suite, Apt. #, etc.

4. FEI Number

593526090

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

9. Name and Address of Current Registered Agent

WRIGHT, ERIC  
3545-1 ST JOHNS BLUFF RD S, SUITE #335  
JACKSONVILLE FL 32224

10. Name and Address of New Registered Agent

81 Name

Wright Eric

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

5350 Bayley Rd

83

84 City

Jacksonville

FL

85 Zip Code

32210

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 Eric Wright Vice President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/30/99

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME GIVENS, WYNETTA  
STREET ADDRESS 1711 W 14TH ST  
CITY-ST-ZIP JACKSONVILLE FL 32209

☐ DELETE

TITLE V  
NAME WRIGHT, ERIC  
STREET ADDRESS 1711 W 14TH ST  
CITY-ST-ZIP JACKSONVILLE FL 32209

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eric Wright

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/99

904-777-1640

Daytime Phone #

CR2E034 (1/1/98)