

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S73554 (5)

1. Corporation Name
98 PIT STOP INC.



Principal Place of Business

4980 HWY. 98 NORTH
LAKELAND FL 33809

Mailing Address

8606 PLANTATION RIDGE BLVD
LAKELAND FL 33809
US

3. Date Incorporated or Qualified
08/15/1991

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 4444 U.S. Hwy 98 North

26 4444 U.S. Hwy 98 North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 743

27 # 743

City & State

City & State

23 Lakeland, Florida

28 Lakeland, Florida

Zip

Country

Zip

Country

24 33809

25 Polk

29 33809

30 Polk

4. FEI Number

59-3078527

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, DAVID L.
8606 PLANTATION RIDGE BLVD
LAKELAND FL 33809

81 Name

Johnson, David L.

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

4444 U.S. Hwy 98 North

83

743

84 City

Lakeland

FL

85 Zip Code

33809

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 607.0503, Florida Statutes.

SIGNATURE

David L. Johnson

4-12-96

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

(NOTE: Registered Agent Signature required when reappointing.)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME JOHNSON, DAVID L.
STREET ADDRESS 8606 PLANTATION RIDGE
CITY-ST-ZIP LAKELAND FL ☐ DELETE

1. TITLE P ☒ Change ☐ Addition
12. NAME Johnson, David L.
13. STREET ADDRESS 4444 U.S. Hwy 98 North # 743
14. CITY-ST-ZIP Lakeland, FL 33809

TITLE ST
NAME JOHNSON, LOIS
STREET ADDRESS 8606 PLANTATION RIDGE
CITY-ST-ZIP LAKELAND FL ☐ DELETE

2. TITLE ST ☒ Change ☐ Addition
22. NAME Johnson, Lois L.
23. STREET ADDRESS 4444 U.S. Hwy. 98 North # 743
24. CITY-ST-ZIP Lakeland, FL 33809

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3. TITLE
32. NAME
33. STREET ADDRESS
34. CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5. TITLE
52. NAME
53. STREET ADDRESS
54. CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6. TITLE
62. NAME
63. STREET ADDRESS
64. CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

David L. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-96 (941) 852-1684

Date

Daytime Phone #

CR2E034 (12/95)