FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

AININ	1997		Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
1. Corporati	IMENT # SS I EXHAUST, INC.	3733	(1)							 	
Dring val Olo	ce of Business	Mailin	Addrose				— I TODATTO AU ITATO ANA JOHEO ANTO ANT				
'	CENTER ROAD	17370	Mailing Address 17370 ALICO CENTER RD FT MYERS FL 33912-6018 US								
							 Date Incorporated or Qualified 11/12/1991 	3a. Date of L 06/11/19	96		
2. Principat 21	Place of Business	2a. M 26	ailing Address				4, FEI Number 65-0296579			ied For Applicable	
Suite, Ap	rt. ₩, etc.	St 27	uite, Apt. #, etc.				5. Certificate of Status Desired	1 1	75 Ad se Requ	ditional pired	
City & Sta 23	ale	Ci 28	ty & State				Election Campaign Financing Trust Fund Contribution		.00 M		
Z(p 24	Countr 25	y Zi 29 ass of Current Register	-	Coun	try		This corporation has liability for Florida Statutes Name and Address of New Re	Yes No	ders. 1	99.032,	
KF	PICH, JOHN A.		ou Agon.	18	31	Name	10. 110110 010 110100 01 1101		***************************************		
17370 ALICO CENTER ROAD					12	Street Ad	dress (P.O. Box Number is Not Acceptat	ole)			
	MYERS FL 33912			}							
				8	33						
				Ţ	34	City		FL 85	Zip Co	ode	
11. Pursuar	nt to the provisions of Sec	tions 607,0502 and 607.	1508, Florida Statut	es, the abo	evic	named co	rporation submits this statement for the p		ing its	registered	
office or agent 1	r registered agent, or both am familiar with, and acc	n, in the State of Florida. ept the obligations of, S	Such change was : action 607.0505, FI	authorized orida Statu	by tes.	the corpor	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointme	nt as re	gistered	
SIGNATURE	911	ilul					4-1	77			
12.	Symple typy from and all	Fol registered agent and little Far FFICERS AND DIRECTO		E: Registerød /	Ager	l signature req	julied when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRE	CTORS	IN 12	
DILE	TD 1/2	THO HO MAN DINEOTO	DELETE	1.1 TiTL	ŧ		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cha		Addition	
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STREET ADDRESS	JOSES ALLIGHIN DE	}				ADDRESS					
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NAME	TABOR, SUSAN			6.2 NAN	AE.						
STREET ADDRESS	s 13418 WINNING CO	olors in		6.3 STR	EET A	ADDRESS					

14. If do 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 arm 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

FILED

Apr 09 1997 8:00am