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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V04207

(9)

DAVCAR CORPORATION

SIGNATURE:

Principal Plac 8207 COLLIER TAMPA FL 338	PLACE	8207 COLLIER	Mailing Address 8207 COLLIER PLACE TAMPA FL 33637-7902							
						3. Date Incorporated or Qualifie 01/06/1992		ate of Last Re 22/1996	eport]
·····	lace of Business	2a. Mailing Ac	dress			4. FEI Number		Ар	plied For	
21		26	<i>H</i>			59-3097736			t Applicable	<u>,</u>
Suite, Apt. #, etc		27 Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	Θ	City & Stat	City & State			6. Election Campaign Financing	9	\$5.00	May Be	1
23		28			······································	Trust Fund Contribution		Added t		
Zip 24	Country 25	intry Zip 30		Country 0		This corporation has liability for intangible tax under s. 199.032, Florida Statutes This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of	Current Registered Agen	t			10. Name and Address of New	Registered	Agent		1
MILL	ER, DAVID E.			81	Name	i				
	COLLIER PLACE			82	Street Ad	dress (P.O. Box Number is Not Accep	otable)			-
TAM	PA FL 33637								,.,	
				83		$(C_{ij}, C_{ij}, C_{$:		
				84	City		FL	85 Zip (Code	
11. Pursuant office or ragent. La	to the provisions of Sections 6 registered agent, or both, in the miliar with, and accept the	07.0502 and 607.1508, Fk e State of Florida Such ch e obligations of, Section 60	orida Statutes ange was aut 07.0505, Florid	, the above thorized by da Statute	e-named co the corpor s.	rporation submits this statement for the ation's board of directors. I hereby ac		f changing its pointment as	s registered registered	
SIGNATURE.	Signature, typed or printed name of regis	tered agent and title if applicable	(NOTE: F	Registered Age	ent signature req	uired when reinstating)	DATE			
12.	OFFICE.	RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO O	FICERS AND	DIRECTOR	IS IN 12]́β
THLE	0		DELETE	1.4 TITLE				Change	☐ Addition	֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
NAME	MILLER, DAVID E.			1.2 NAME						18
STREET ADDRESS	8207 COLUER PLACE			1.3 STAEET	ADDRESS	·				ĮŠ
CITY-ST-ZIP	TAMPA FL 33837			1.4 CiTY-5	ST-ZIP					_[8
TiTLE	D		DELETE	21 TITLE				Change ·	Addition	١
NAME	MILLER, CAROLINE D.			2.2 NAME						
STREET ADDRESS	8207 COLLIER PLACE			2.3 STREET	ADDRESS		•			
CITY-ST-ZIP	TAMPA FL 33637			2.4 CITY-	ST-ZIP		·	· • • • • • • • • • • • • • • • • • • •	····.	
TITLE			DELETE	31 TITLE				L Change	Addition	
NAME				32 NAME			, - ·			
STREET ADDRESS				33 STREET	ADDRESS					
CITY-ST-ZIP			DELETE	3.4. CITY-	ST-ZIP					_
TITLE			DELETE	4.1 THILE				L Change	Addition	
NAME				4. 2 NAME	-					
\$1REET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-7IP			Dr. CTC	4.4 City-5	ST-ZIP			- T-10:		_
MILE		Ц	DELETE	5.1 TITLE				☐ Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIF			N. P.	54 CITY-5	ST-ZIP					_
TITLE		Ц	DELETE	6.1 TITLE				Change	Addition	
NAME				6.2 NAME		***				
STREET ADDRESS				63 STREET	anneree					- 1

64 CITY-ST-ZIP

14. I 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 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 3 lift hanged, or on an attachment with an address.