

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

FILED
May 21 1996 8:00 am
Secretary of State

DOCUMENT # V17178 (7)

1. Corporation Name

1ST CLASS CARS, INC.

Principal Place of Business

450 EAST BAY DRIVE
LARGO FL 34640

Mailing Address

450 EAST BAY DRIVE
LARGO FL 34640



2. Principal Place of Business	2a. Mailing Address
21 8391 US 19 NO	26 8391 US 19 NO
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 PINELLAS PARK, FL.	28 PINELLAS PARK FL.
Zip	Zip
24 34665	29 34665
Country	Country
25	30

3. Date Incorporated or Qualified	3a. Date of Last Report
02/26/1992	05/01/1995
4. FEI Number	Applied For
59-3109981	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	
☐	
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JULIAN, ERIC
450 EAST BAY DRIVE
LARGO FL 34640

10. Name and Address of New Registered Agent

81 Name	ERIC JULIAN
82 Street Address (P.O. Box Number is Not Acceptable)	8391 US 19 NO
83	
84 City	PINELLAS PARK
FL	85 Zip Code
	34665

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 x ERIC JULIAN

Signature of type or person authorized to register agent and the fee paid

(Print Name of Agent and the fee paid)

5-15-96

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	☐ DELETE	1. TITLE	☐ Change ☐ Addition
NAME		2. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY - ST - ZIP		4. CITY - ST - ZIP	
TITLE	☐ DELETE	5. TITLE	☐ Change ☐ Addition
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY - ST - ZIP		8. CITY - ST - ZIP	
TITLE	☐ DELETE	9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY - ST - ZIP		12. CITY - ST - ZIP	
TITLE	☐ DELETE	13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY - ST - ZIP		16. CITY - ST - ZIP	
TITLE	☐ DELETE	17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY - ST - ZIP		20. CITY - ST - ZIP	

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: x ERIC JULIAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-16-96 (013) 578-0188

Date

Day, Time, Phone, #

CR2E034 (12/95)