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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V39020**

1. Corporation Name

TERINO'S LISED CARS INC

Principal Place of Business

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90198 011 ***150.00

r Ellino	a used dano, inc.						
Principal Place	e of Business	Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1412 E. BAKER PLANT CITY FL US		1412 E. BAKER STREET PLANT CITY FL 33566 US		DO NOT WRITE IN THIS	SPACE		
		33			3. Date Incorporated or Qualifed 05/27/1992		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21 201 E. BAKER STREET		26 201 E. BAKER STREET			59-3127298	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		
City & State		City & State 28 PLANT CITY,	FL		6. Election Campaign Financing. Trust Fund Contribution	\$5.00 Added 1	
Zip	Country	· · · · · · · · · · · · · · · · · · ·	Country		8. This corporation owes the current year in	tangible	
24 3356	25 USA	29 33566 30	us	//	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
414	CAL O OTERNIEN		81	Name			
4830	en, C stephen) w kennedy blyd		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	E 335		83				
TAM	PA FL 33609		84	City		85 Zip (Code
				•	FL	_	
office or re	egistered agent, or both, in the State on me familiar with, and accept the obligat	of Florida. Such change was author ions of, Section 607.0505, Florida S	rized by th Statutes.	ne corporati	poration submits this statement for the purpose of on's board of directors. I hereby accept the appointment when reinstation.	intment as re	gistered
	Signature, typed or printed name of registered agen OFFICERS AN			signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12
12. TITLE	D OFFICERS AN		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICEROA	Change	Addition
NAME	TERINO, CHRISTOPHER A.	_	1.2 NAME		•	-	
STREET ADDRESS	1412 E. BAKER STREET		13 STREET A	ADDRESS 20	SI E. BAKER STREET		
CITY-ST-ZIP	PLANT CITY FL 33566		1.4 CITY-ST-	7-34	UNUT CITY, FL 33566		
TITLE	18411 011112 00000		2.1 TITLE	<u></u>		☐ Change	☐ Addition
NAME			2.2 NAME				ļ
STREET ADDRESS			2.3 STREET A	ADDRESS	,		- 1
CITY-ST-ZIP	•		2. 4 CITY-ST-		a market service of the contract of	2 42	
TITLE			31 TITLE			Change	☐ Addition
NAME		The state of the s	3.2 NAME				}
STREET ADDRESS		.	3.3 STREET A	NODRESS	•		
CITY-ST-ZIP			3.4. CITY-ST-				
TITLE			4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME		84		
STREET ADDRESS		.	4.3 STREET A	ADDRESS			
CITY-ST-ZIP		.	4.4 CITY-ST-	ZIP		4-4-	
TITLE			5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME			•	
STREET ADDRESS			5.3 STREET A	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-	ZiP			
TITLE	,	E3 020270	6.1 TITLE			☐ Change	☐ Addition
NAME	* ,'		6.2 NAME		-		
STREET ADDRESS			6.3 STREET A	ADDRESS			1
CITY-ST-ZIP		· ·	6.4 CITY-ST-	ZIP	·		

CITY-ST-ZIP 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:

C A T

C. H. TERINO, PRES. 2/24/99

813-719-3031