**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V68799**

PETROS OF DAYTONA BEACH, INC.

Mailing Address

FILED Mar 25, 1999 8:00 am Secretary of State 03-25-1999 90048 020 \*\*\*150.00



Filliupai Fiau	e or pusiness	(Mailing ) word	-55						
			2 ORANGE AVENUE AYTONA BEACH FL 32114			DO NOT WRIT	E IN THIS S	PACE	
						3. Date Incorporated or Qualifed			
						10/05/1992			
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
21 26						59-3144757		1	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			. #, etc.			5. Certifcate of Status Desired		7	Additional
22 27						5. Certificate of Ciation Dooring		Fee I	Required
City & State City & State			te			6. Election Campaign Financing			May Be
23 28						Trust Fund Contribution			d to Fees
Zip				Country		8. This corporation owes the curre			<b>\_</b> /.
24	25	29	30			Personal Property Tax.		Yes	No
	9. Name and Address of Curre	nt Registered Ager	nt	-		10. Name and Address of New R	egistered A	gent	
1117	NAD TIMOTHY C		~	81	Name				-
LUZNAR, TIMOTHY C 952 ORANGE AVE.				82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
	TONA BEACH FL 32114			L					
. DAT	IUNA BEACH FL 32114	•		83					
				84	City		FL	85 Zig	Code
		00 1007 4500 FI	d Grander th		namad sar	receives submits this statement for the		 hanging i	ts registered
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the State	602 and 607.1508, FI a of Florida. Such ch	orida Statutes, th ange was authori	e above ized by	the corporat	rporation submits this statement for the tion's board of directors. I hereby accep	t the appoint	ment as	registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 60	07.0505, Florida S	Statutes					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Regist	tered Ager	t signature requi	ired when reinstating)	DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS AND	DIREC	TORS IN 12
TITLE	Р	Ľ	DELETE 1	.1 TITLE		•		☐ Change	e 🗌 Addition
NAME	LUZNAR, TIMOTHY C		1	.2 NAME					
STREET ADDRESS	952 ORANGE AVE.		1	.3 STREET	ADDRESS				
CITY-ST-ZIP	DAYTONA BCH. FL		1	.4 CITY-S	r-ZiP				
TITLE ·	VPT .		DELETE 2	.1 TITLE				☐ Change	e 🔲 Addition
NAME	COSCIA, GEORGE		2	2.2 NAME					
STREET ADDRESS	952 ORANGE AVE.		2	3 STREET	ADDRESS				[
C/TY-ST-ZIP	DAYTONA BCH. FL		2	2. 4 CITY - 9	T-ZIP				
TITLÉ	S		DELETE 3	3.1 TITLE				☐ Change	e 🗀 Addition
NAME	BUCK, VERNON		· 3	3.2 NAME					
STREET ADDRESS	952 ORANGE AVE.		3	3.3 STREET	ADDRESS		•		
CITY-ST-ZIP	DAYTONA BCH. FL		3	3.4, CITY- S	T-ZIP				
TITLE		Ë	DELETE 4	1.1 TITLE				Chang-	e
NAME			4	. 2 NAME					
STREET ADDRESS			4	I.3 STREET	ADDRESS				
CITY-ST-ZIP		•	4	I.4 CITY-S	r-zi₽				
TITLE				5.1 TITLE				Chang	e
NAME				5.2 NAME					
STREET ADDRESS			5	5.3 STREE	ADDRESS				•
CITY-ST-ZIP				5.4 CITY-S	T-ZIP				
TITLE			DELETE 6	3.1 TITLE				☐ Chang	e Addition
NAME			6	3.2 NAME		-			ł
STREET ADDRESS			6	3.3 STREET	ADDRESS				
I STREET ADDRESS	T .		<b>I</b> ~						

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 of the receiver of the corporation of the receiver or trustee empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR