

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

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Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90227 037 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024307

1. Corporation Name
COASTLINE TIRE AND AUTO AIR, INC.

Principal Place of Business
2574 MOHAWK AVE.
FORT PIERCE FL 34946

Mailing Address
2574 MOHAWK AVE.
FORT PIERCE FL 34946



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/13/1997

4. FEI Number
APPLIED FOR 65-0829114

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21 1647 U S # 1
Suite, Apt. #, etc.

2a. Mailing Address
26 1647 U S #1
Suite, Apt. #, etc.

23 Sebastian, Fl.
City & State

28 Sebastian, Fl.
City & State

24 32958
Zip

29 32958
Zip

25 USA
Country

30 USA
Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEES, ANGELA M
2574 MOHAWK AVENUE
FORT PIERCE FL 34946

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 *Angela M. Dees*

4-21-99
DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Table with 2 columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include Michael A. Dees and Angela M. Dees.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows for 1.1 to 6.4.

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: *Angela M. Dees* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-99
Date

561-581-0605
Daytime Phone #

CR2E034 (1/98)