

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

FILED

Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 282879

(6)

1. Corporation Name

TERRY'S AUTO SUPPLY, INC.

Principal Place of Business

524 NORTH DIXIE HIGHWAY
P.O. BOX 487
HOLLYWOOD FL 33022-7487

Mailing Address

524 NORTH DIXIE HIGHWAY
P.O. BOX 487
HOLLYWOOD FL 33020-4404

3. Date Incorporated or Qualified

06/30/1964

3a. Date of Last Report

04/23/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

4. FEI Number

59-1055276

Applied For

Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FINK, STEPHEN W.
14105 SHERIDAN ST.
FT. LAUDERDALE FL 33330

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
CD
FINK, VIVIAN
1228 CORAL LANE
HOLLYWOOD FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
PD
FINK, STEPHEN
14105 SHERIDAN ST
FT. LAUDERDALE FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
VD
LEVY, THERESA
524 N DIXIE HWY
HOLLYWOOD FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
TD
LEVY, HOWARD
524 N DIXIE HWY
HOLLYWOOD FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
SD
FINK, JUDY C.
14105 SHERIDAN ST.
FT. LAUDERDALE FL

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

1/07/97 954-922-0804
Date Daytime Phone #

CR2E034 (9/96)