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 # F37031

HEINALI	DO PAINT & BODY SHOP,	INC.					
Principal Plac	ce of Business	Mailing Address			1 (88) 18 18 18 18 18 18 18	il eleli sisil elel	
7700 NW 72ND AVE 7700 NW 72ND AVE							
MEDLEY FL 33166 MEDLEY FL 33166							
					DO NOT WRITE IN TH	IS SPACE	
	,				3. Date Incorporated or Qualifed 05/27/1981		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	·	pplied For
21		26			59-2095840	· —	lot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·				Additional
22		27			5. Certifcate of Status Desired		Required
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	y	8. This corporation owes the current year I		
24	25		30		Personal Property Tax.	Z Yes	□No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registere	d Agent	
NOV	/OA, JUANA M						
	0 NW 72ND AVE	* * *	82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
MED	OLEY FL 33166		83	1			10 10 81 81 10 10 10 10 10 10 10 10 10 10 10 10 10
					一个人的人,只是你有精髓的	三基 进行	
•	•		84	City	F	85 Zip	Code' "
agent. I a SIGNATURE(am familiar with, and accept the obligation	ations of, Section 607,0505, Flori	ida Statutes	S.	oration submits this statement for the purpose on's board of directors. I hereby accept the app	0 - 9 9	egistered
agent. I a	am lamiliar with, and accept the obligation in the obligation of t	ations of, Section 807.0505, Flori on and title if applicable. (NOTE: ND DIRECTORS	ida Statutes	S.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	1-99	
agent. I a	Im lamiliar with, and accept the obligation in the obligation of t	ations of, Section 607,0505, Flori Published applicable. (NOTE:	ida Statutes Registered Age	S.	d when reinstating)	1-99	ORS IN 12
agent. 1 a SIGNATURE(12. TITLE NAME	Signature, type or printed name of registered age OFFICERS AT NOVOA, JUIANA N	ations of, Section 807.0505, Flori on and title if applicable. (NOTE: ND DIRECTORS	Registered Age	S.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. (a SIGNATURE)	Signature, types or printed name of registered age OFFICERS AI PD NOVOA, JUIANA N 1420 SW 126 ST	ations of, Section 807.0505, Flori on and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME	S.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, type by printed name of registered age OFFICERS AI PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL	ations of, Section 387.0505, Flori Property of the if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	s. int signature required T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, type by printed name of registered age OFFICERS AI PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD	ations of, Section 807.0505, Flori on and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	s. int signature required T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, type by printed name of registered age OFFICERS AND NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO	ations of, Section 387.0505, Flori Property of the if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	s. Int signature requires IT ADORESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. 1 a SIGNATURE(12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST	ations of, Section 387.0505, Flori Property of the Management of	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL	ations of, Section 387.0505, Flori Property of the Management of	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD	ations of, Section 287.0505, Floring Control of the Property o	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12 Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M	ations of, Section 287.0505, Floring Control of the Property o	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M	ations of, Section 287.0505, Floring Control of the Property o	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS T ADDRESS T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET	ations of, Section 287.0505, Floring Control of the Property o	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS T ADDRESS T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO	DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD	DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO	ations of, Section 87.0505, Flore ent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTION Change	ORS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO 1257 W. 79 ST.	DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.1 TITLE 5.1 TITLE 5.1 TITLE	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR Change	ORS IN 12 Addition Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO 1257 W. 79 ST. HIALEAH FL	ations of, Section 87.0505, Flore ent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS T-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTION Change	ORS IN 12 Addition Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO 1257 W. 79 ST. HIALEAH FL	ations of, Section 87.0505, Flore ent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTION Change	ORS IN 12 Addition Addition Addition
AGENT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO 1257 W. 79 ST. HIALEAH FL	DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTI Change	ORS IN 12 Addition Addition Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD NOVOA, JUIANA N 1420 SW 126 ST MIAMI FL TD NOVOA, REINALDO 1420 SW 126 ST MIAMI FL SD NOVOA, REINALDO M 12855 SW 21ST STREET MIAMI FL VD VEGA, PEDRO 1257 W. 79 ST. HIALEAH FL	ations of, Section 87.0505, Flore ent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE	T ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTION Change	ORS IN 12 Addition Addition Addition

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90039 035 ***158.75