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

PROFIT CORPORATION ANNUAL REPORT **1997**



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

 Corporation 	MENT # F8466 OTORS OF DANIA, INC.	9 (3)			
Principal Place of Business % FRANK LOPES 324 SW 4TH COURT DANIA FL 33004		Mailing Address FRANK LOPES 324 SW 4TH COURT DANIA FL 33004-4903			
				3. Date Incorporated or Qualified 06/09/1982	3a. Date of Last Report 07/02/1996
2. Principal Place of Business		28. Mailing Address		4. FEI Number	Applied For
21		26	···· · · · · · · · · · · · · · · · · ·	59-2211996	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation has liability for	/ `
24	25 9. Name and Address of Cur	29	30	Florida Statutes 10. Name and Address of New R	Yes No
I AN	ES, FRANK	rent Registered Agent	81 Name	10. Name and Address of New A	editreted ydeur
	SW 4TH COURT				
	IA FL 33004		82 Street Ac	Idress (P.O. Box Number is Not Accepta	ible)
			83		· · · · · · · · · · · · · · · · · · ·
			84 City		85 Zip Code
					FL T
office or agent. La	m familiar with, and accept the of	oligations of, Section 607.0505, F	lorida Statutes.	orporation submits this statement for the ration's board of directors. I hereby acce	
12.	Stignature: typed or per tea name of registered OFFICERS	Lagent and the Hoppicable (NO AND DIRECTORS	TE: Registered Agent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
1:TLE	PD	DELETE	1.1 TITLE	ADDITION OF THE OFFI	Change Addition
NAME	LOPES, FRANK		1.2 NAME		
STREET ADDRESS	703 NW 9TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIF	DANIA FL		1.4 CITY - ST - ZIP		
TITLE	ST LODGO LOVOE	DELETE	2.1 TITLE		Change Addition
NAME	LOPES, JOYCE 703 NW 9TH AVENUE		2.2 NAMÉ		
STREET ADDRESS	DANIA FL		2.3 STREET ADDRESS		
CITY-ST ZIP TITLE		DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREE! ADDRESS			3.3 STREET ADDRESS		
C(1) - ST - 7(F)			3.4. CITY - ST - ZIP	·	
TIFLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY-ST-ZIP		Channa I Addition
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME 5.3 STREET ADDRESS	1	
STREET ADDRESS CITY+S1+ZiP			5.4 CITY-ST-ZIP		
LILE LILA - 21 - 516		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		_ • -
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - SI - ZIP			64 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:

THE AND TYPED ON PRINTING NAME OF SIGNING OFFICER OF DIRECTOR

Date

Descriptions

Date

Descriptions