FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

Principal Place of Business

G40411 **DOCUMENT #**

LOU BACHRODT CHEVROLET, INC.

FILED Jan 31 1996 8:00 am Secretary of State

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Principal Place	of Business	Mailing Addres	Mailing Address				r comparis mater mater mater trade trate mater miter				
1801 W ATLANTIC BLVD P.O. BOX 939 POMPANO BEACH FL 33069		1801 W ATLANTIC BLVD P.O. BOX 939 POMPANO BEACH FL 33069									
					05/20/1983				e of Last Report 01/17/1995		
2. Principal Pa 21	ace of Business	2a. Mailing Ad	dress			4.	FEI Number 59-2295180			Applied For	
Suite, Apt. #	и др.	26	L -3-				38-2283 100			Not Applicable	
22 Gity & State		Suite, Apt.					Certificate of Status Desired	XX	•	5 Additional Required	
23		City & Stat	e			6.	Election Campaign Financing Trust Fund Contribution			00 May Be	
Zψ	Country	Zip	Cour	itry		8.	This corporation has liability for i	ntanoible :			
24	25	29	30	•		•	Florida Statutes Yes		tax unuor s	199.032,	
	9. Name and Address of Current	Registered Agen				10.	Name and Address of New R		Agent		
				B1	Name				-		
	NG, O'BRYAN & FLEMING, P.A.		-	82	Stroot Add	1000 /D	O. Box Number is Not Acceptab	7.5			
	BROWARD BLVD., 7TH FL.			04	Street Add	iess (r	.O. box number is not acceptab	ю			
ATTN:			ļ	83							
FT. LA	UDERDALE FL 33394		1		011				, , ,	·	
				84	City			Fl	85 Z	ip Code	
11. Pursuant to	the provisions of Sections 607,0502 and agent, or both, in the State of Florida	nd 607.1508, Flor	ida Statutes, the above	ı /e-r	named corpo	ration s	submits this statement for the our			registered office	
	ed agent, or both, in the State of Florida h, and accept the obligations of, Section			orpo	oration's boa	rd of d	irectors. I hereby accept the appo	pintment a	s registered	d agent. I am	
	, end the poliginaria of, cooper	1007,0000, 110110	a Glattiles.								
SIGNATURE	Styliet no ityr fatt or partied name of registeristi agent and	d little it applicable	(NOTE Registered)	 Agun	C Skarot recreasers	ed when re	pinst atom)	DATE			
12.	OFFICERS AND I	DIRECTORS	13.				ADDITIONS/CHANGES TO OFFI		D DIRECTO	ORS IN 12	
TITLE	PD	□ Di	LETE 1 1 TIT	LE					Change	Addition	
NAME	BACHRODT, LOUIS C, III		1.2 NAI	ИE							
STREET ADDRESS	1801 W ATLANTIC BLVD		13 \$16	FFT	ADDRESS						
CHY ST Zift	POMPANO BEACH FL		14 CH								
Tiff(f	VD				11-21				Change	Addition	
NAME	BACHRODT, LOUIS C., JR.		2 2 NAI						☐ Cridinge	M voncou	
STREET ADDRESS	7070 CHERRYVALE BLVD N				1000100						
CHY-St-Zin	ROCKFORD IL				ADDRESS						
TITLE	n .	T Di	24 CIT LETE 3.1 TIT		1 - ZIP						
NAME	KLINGER, SIDNEY								☐ Change	☐ Addition	
STREET ADDRESS	7070 CHERRYVALE N BLVD		3 2 NAI								
	ROCKFORD IL				ADDRESS						
CHY ST-ZIP	ST		3 4 CIT		I - ZiP	<u>.</u>					
TIL.F	KMETZ, GERALD	D9			1				Change	Addition	
NSME			4.2 NAI	Æ	Ī						
STHILL ACTURESS	1801 W ATLANTIC BLVD		4.3 S1F	EET.	ADDRESS						
CITY - ST- ZIP	POMPANO BEACH FL		4 4 CIT	Y - \$1	T-ZIP		· · · · · · · · · · · · · · · · · · ·				
TUTLE		□ D€	LETE 5 1 til	LE					☐ Change	Addition	
NAM:			5.2 NAM	Æ							
STREET ADDRESS			5.3 STR	EET.	ADDRESS						
Crty+\$1+ZiP			5.4 CIT	r - S1	T-ZIP						
THE		DE							Change	Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

62 NAME

6.3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS.

GERALD KMETZ

01/25/96

954/971-3000