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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	1997 DIV		•	Secretary of State  /ISION OF CORPORATIONS			Secretary of State			
DOCUI	MENT # JO	3089	(6)			'				
1. Corporation	n ryame		(-)							
MANDU	r auto care, in	U.				. anniam a			h);	
Principal Placi	e of Business	Mailing /	Address		<del> </del>		HA BAKAN INTI DARAT KALILI KAH	i in in the state of the state		
1504 A. S.W. 3			1504 A. S.W. 3RD STREET							
POMPANO BEA			POMPANO BEACH FL 33069-3246							
						9 Date Inha	rporated or Qualified	3a. Date of Last	Donal	
						03/10/1		01/25/1996		
2. Principal P	lace of Business	<b>28.</b> Madu	ng Address			4. FEI Numb		<del></del>	Applied For	
21		26	· ·			59-262	26933	<del> </del>	Not Applicable	
Suite, Apl.	#, etc.	Suite	. Apt. #, etc.	····			of Status Desired	\$8.75	Additional	
22		27						Fee	Required	
City & State	e	¬ ′	& State			i i	Campaign Financing		May Be	
<b>23</b> Ζφ	Countr	<b>28</b>   y   Zip	<del></del>	Count	D/		d Contribution		d to Fees	
24	25	29	· · · · · · · · · · · · · · · · · · ·	30	,	B. This corp.	oration has liability for atutes	injangibie tax undei Yes □ No	s. 199.032,	
		ss of Current Registered					d Address of New Re			
TET	RO FRANK			8	1 Name					
	1 SW 44TH STREET			8:	2 Street	Address (P.O. Box N	umber is Not Acceptal	ble)	<del></del> }	
FT. LAUDERDALE FL 33312										
				8:	3					
				8-	4 City	,	, 14 . July	FL 85 Zi	p Code	
11 Pursuant	to the provisions of Sect	tions 607 0502 and 607 15	08 Florida Statute	s the abo	ve-named	corporation submits	this statement for the r	purpose of changing	its registered	
office or r	registered agent, or both	tions 607 0502 and 607.150 i, in the State of Florida. Su apt the obligations of, Sect	ch change was at	uthorized b	by the corp	oration's board of di	rectors. I hereby acce	pt the appointment	as registered	
	art rating with all a do	apt the obligations of, sect			<u>*</u> +8		- 1/	14 97		
SIGNATURE	Signiture, typed of profiled name	of restered agent and trie if applic	anle FRAN	Registered A	gent signature	/equired when reinstating)		DAYE		
12.	DP /	FFICERS AND DIRECTORS		13.		ADDITION:	S/CHANGES TO OFFI			
THILE	TETRO, WILLIAM A	ID	☐ DELETE	1.1 TITLE				Chang	e 🔲 Addition	
NAME STREET ADDRESS	3241 S.W. 44TH ST			1.2 NAME	ET ADORESS					
CITY - \$1 - ZIP	FT LAUDERDALE F			14 CITY						
TITLE	DST		DELETE	21 TITLE				Chang	B Addition	
NAME	(TET50) FRANK			2.2 NAM	E	Tetro				
STREET ADDRESS	3241 S.W. 44TH S			2.3 STRE	ET ADDRESS	Tetro (Spelledi:	(pnong)			
C(TY-ST-Z)P	FT LAUDERDALE F	<u>L</u>		2. 4 CITY		<u> </u>				
THILE	D CDANK		DELETE	3 1 TITLE			٠.	☐ Chang	e 🔲 Addition	
NAME	TETRO, FRANK   3241 S.W. 44TH S	T		3.2 NAM8						
STREET ADDRESS CITY+ST-7IP	FT LAUDERDALE F			3.3 STREE	ET ADORESS					
TITLE			DELETE	4.1 TITLE				Chang	e Addition	
NAME	l I			4 2 NAM				<u> </u>	_	
STREET ADDRESS	İ			1	et address					
CITY-ST ZIP				4.4 C(TY	- ST - ZIP	****				
TITLE			DELETE	5.1 TITLE			-	Chang	e 🔲 Addition	
NAME				5.2 NAMI	£					
STREET ADDRESS					et aodress				ľ	
C:TY - ST - ZIP			DELETE	5.4 CITY				Chang	e 🔲 Addition	
TITLE NAME			F. Direct	6.2 NAMI				CHAIN CT	. Landonson	
STREET ADDRESS	<b>\</b>				ET ADORESS					
3.1.4.1.7.10.1.7.4.00	1					l				

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and cated on this annual report of 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 combination of 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 duanged or un an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Feb 06 1997 8:00am