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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J58739

(0)

PAYNE 'N' SAINE AUTO BODY, INC.

Described Over	a of the division									
,	ee of Business	Mailing Address					e adderent diese firet aftere stadet freit ibrit.	***********	Diku Bibit Asfii	4.0111601
% JIMMY L. S/ 5801 N ATLAN		% JIMMY L. SAINE 5801 N ATLANTIC #702	% JIMMY L. SAINE 5801 N ATLANTIC #702							
CAPE CANAVE		CAPE CANAVERAL FL 32	2920-3943				,,,,,,,		· · · · · · · · · · · · · · · · · · ·	
						3	Date Incorporated or Qualified 02/23/1987		ate of Last R 24/1996	leport
· · · · · · ·	Place of Business	2a. Mailing Address				4	FEI Number		~~~ ~~	oplied For
21		26					59-2765871		No	ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				. 5	. Certificate of Status Desired			Additional
City & Stat		City & State				<u> </u>				equired
23]			28			. 6	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
7 _{IP}	Country	Zip					This corporation has liability for	intencible		
24	25	29	30	•		. *			X No	. 195.052,
	9. Name and Address of Curre	nt Registered Agent				10). Name and Address of New Re	gistered	Agent	
SAIN	NE, JIMMY L.			81	Name					
	1 N ATLANTIC		82 Street Add			Address (P.O. Box Number is Not Acceptat	ole)		
#70										
CAP	PE CANAVERAL FL 32920			63						
				84	City				85 Zip	Code
44 D	ALAIT. II. A. HE HE FROM A PART OF	00 - 1 00 4 00 5		<u> </u>				<u> </u>	_ i	·····
DIRICE OF	to the provisions of Sections 607.05 registered agent, or both, in the Stat	le of Florida. Such change was	: authorizi	ed by	the corp	corporatii poration's	on submits this statement for the p board of directors. I hereby accep	surpose o	if changing it pointment as	is registered realstered
agent La	om familiar with, and accept the obli	gations of, Section 607.0505, F	Florida Sta	atutes			, ,			
SIGNATURE	Shor atore, typed or profed paner of regettered a	ment and title Land realite (NC	Mf: Benieter	ed Age	t elanahua	toguited who	en reinstatino)	DATE		
12.		NO DIRECTORS	13		k aigi kitoro	<u>-</u>	ADDITIONS/CHANGES TO OFFICE		D DIRECTOR	3S IN 12
TITLE	PT	DELETE	11	TITLE		[***************************************		Change	Addition
NAME	SAINE, JIMMY L.		1.2	NAME		ľ				
STREET ADDRESS	5801 N ATLANTIC #702		1.3	STAFET	ADDRESS					
CITY-ST-7-P	CAPE CANAVERAL FL		1.41	CITY-SI	- ZIP					
THILE		☐ DELETE	21	TITLE				: 1	Change	Addition
NAME			221	NAME						
STREET ADDRESS			. 23	STREET	ADDRESS		•			
CITY-ST-7IP		Florier		CITY-S	T-ZIP					
FILE		[] DELETE		TITLE					Change	Addition
NAMI;			1	NAME						
STREET ADDRESS CITY-ST-ZIP			1		ADDRESS					
TillE		DELETE		CITY-S TITLE	1 · ZIP				Change	Addition
NAME			1	NAME			* .		L Orlange	
STREET ADORESS					ADDRESS					
CHY-ST-ZIP				CITY - ST			The state of the s			
TITLE		DELETE		TITLE		· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAME.			521	NAME						
STREET ADDRESS			5.3	STREET :	ADDRESS					
City-St-Zir			5.4	CHTY - ST	- ZIP	*****				
TITLE		L DELETE	6.1	TITLE			•		Change	Addition
NAME			6.21	NAME						
STREET ADORESS			6.3 5	STREET	ADDRESS					
001Y-\$1-ZIP 14 1 do berel	by certify that the information suppli	and with this tiling does not asse		CITY SI		totod in C	polion 110 07(9)(i) Fig. 2- 0(-(-1-	. I &a	a marking the	Il. a
informali:	on indicated on this annual report or	supplemental appual report is	true and	ACCU	rata and	l that mu c	cionatura chall have the come leas	d offect a	e it made un	dar aath: that
t am an o	officer or director of the corporation on In Block 12 or Block 13 if changed	or the receiver or trustee empo	wered to	execu	ite this r	report as r	required by Chapter 607, Florida S	tatutes; a	ind that my r	iame
		. \mathcal{D}	. N. K. K. D. S.	. Isto i				1	_	