

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K80306 (9)**

1. Corporation Name
P & L AUTOMOTIVE OF JACKSONVILLE, INC.

New Address
**4130 Spring Park Rd.,
Jax, Fla 32207**



Principal Place of Business

Mailing Address

**C/O LEONARDO ESTEVEZ
6299 POWERS AVENUE - BLDG. 13
JACKSONVILLE - FL 32217**

**C/O LEONARDO ESTEVEZ
6299 POWERS AVENUE - BLDG. 13
JACKSONVILLE - FL 32217**

4130 Spring Park Road Jax, Fla 322107

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified

3a. Date of Last Report

04/14/1989

01/23/1995

4. FEI Number

Applied For
Not Applicable

59-2946846

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ESTEVEZ, LEONARDO
6299 POWERS AVENUE, BLDG. 13
JACKSONVILLE FL 32217**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: DELETE
NAME: **VSD ESTEVEZ, LEONARDO**
STREET ADDRESS: **8039 NAPO DRIVE JACKSONVILLE FL**

1. TITLE: Change Addition
2. NAME: **1580 Pitch Pine Avenue**
3. STREET ADDRESS: **32259**

TITLE: DELETE
NAME: **PTD ESTEVEZ, PABLO**
STREET ADDRESS: **2473 MAYAPPLE ROAD EAST JACKSONVILLE FL 32211**

2. TITLE: Change Addition
3. NAME: **32277**

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
TITLE: DELETE

3. TITLE: Change Addition
4. NAME:
5. STREET ADDRESS:
6. CITY - ST - ZIP:
4. TITLE: Change Addition

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
TITLE: DELETE

5. TITLE: Change Addition
6. NAME:
7. STREET ADDRESS:
8. CITY - ST - ZIP:
5. TITLE: Change Addition

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
TITLE: DELETE

6. TITLE: Change Addition
7. NAME:
8. STREET ADDRESS:
9. CITY - ST - ZIP:
6. TITLE: Change Addition

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
TITLE: DELETE

7. TITLE: Change Addition
8. NAME:
9. STREET ADDRESS:
10. CITY - ST - ZIP:
7. TITLE: 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Handwritten Signature)

2-13-96 (904) 731-0077

CR2E034 (12/95)