

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra H. Mathart  
Secretary of State  
CORPORATION REGISTRATION DIV.

APPROVED  
AND  
FILED

05 MAY 11 1995

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **V26720**

(5)

FREDERICK'S AUTOMOTIVE, INC.

Principal Office: 14813 U.S. HIGHWAY 19 HUDSON FL 34667 US  
 Mailing Address: 14813 US HIGHWAY 19 HUDSON FL 34667 US

PLEASE WRITE IN THIS SPACE

21	22	23	24	25	26	27	28	29	30	31	32
3. Date of Report Filing Defect		3a. Date of Last Report		4. FID Number		5. Certificate of Status Desired		6. Director Campaign Expenses and Fund Contribution		7. This corporation has liability for at least one violation of Chapter 601, F.S.	
04/03/1992		05/01/1994		59-3125545		<input type="checkbox"/> \$8.75 Additional Fee Required		<input type="checkbox"/> \$5.00 May Be Added to Fees		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WOOTEN, M. FRED 14813 U.S. HIGHWAY 19 HUDSON FL 34667				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. City			
				84. State			
				FL			

11. I, undersigned, the person or persons who have signed this report and who are the officers or directors of the corporation, hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
D WOOTEN, M. FRED 14813 U.S. HWY 19 HUDSON FL	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE
D WOOTEN, MARY P. 14813 U.S. HWY 19 HUDSON FL	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE
	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE
	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE
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	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE
	<input type="checkbox"/> NAME <input type="checkbox"/> ADDRESS <input type="checkbox"/> CITY <input type="checkbox"/> STATE

14. I, undersigned, the person or persons who have signed this report and who are the officers or directors of the corporation, hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief.

SIGNATURE: 4/24/95 813 868-0768

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INCORPORATED,  
MINNISCOTT, MINNISCOTT  
1995



DEPARTMENT OF STATE  
CORPORATION  
CORPORATION  
CORPORATION

APPROVED  
AND  
FILED

APR 14 1994

DOCUMENT # **V28518** (1)

SHINING STAR LIMOUSINE SERVICE, INC.

STATE OF FLORIDA  
TALLAHASSEE

19477 NE 10TH AVE  
SUITE 502  
NORTH MIAMI BEACH FL 33179

19477 NE 10TH AVE  
SUITE 502  
NORTH MIAMI BEACH FL 33179

STATE OF FLORIDA

21	555 NE 15TH ST.	26	555 NE 15TH ST.
22	9TH FLOOR	27	9TH FLOOR
23	MIAMI, FL	28	MIAMI, FL
24	33132	29	33132
25	USA	30	USA

3.	04/14/1992	3a.	03/14/1994
4.	65-0362168	Approved For	Not Applicable
5.	<input type="checkbox"/>	\$8.75 Additional	Fee Required
6.	<input type="checkbox"/>	\$5.00 May Be	Added to Fees
8.	<input checked="" type="checkbox"/> This corporation has not changed its registered office since the last filing of its annual report.		

9. Name and Address of Current Registered Agent

GREENSPAHN, MELVYN G  
3550 BISCAYNE BLVD  
SUITE 404  
MIAMI FL 33137

10. Name and Address of New Registered Agent

81. **KENNETH P. HUTNICK**  
82. **4100 N. MIAMI AVE.**  
83.  
84. **MIAMI, FL** 85. **33127**

11. Signature of New Registered Agent: *Kenneth P. Hutnick* KENNETH P. HUTNICK 4/18/94

12. PRESIDENT / TREASURER & DIRECTOR

DE LA ROSA, ARSENIO  
19477 NE 10TH AVE #502  
NORTH MIAMI BCH FL

13. PRESIDENT / TREASURER & DIRECTOR

NORMA SHELOW  
555 NE 15TH ST., 9TH FLOOR  
MIAMI, FL 33132

14. Signature of Director: *Norma Shelow Pres.* 4/18/94 305-758-3009

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CORPORATION  
ANNUAL REPORT  
1995



STATE DEPARTMENT OF STATE  
CORPORATION  
TALLAHASSEE, FLORIDA

DOCUMENT # **V29174** (2)  
THE PASTRY CONNECTION, INC.

1995  
TALLAHASSEE, FLORIDA

590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL 32707

590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL 32707

21: 26: **SI JVEY LANE**  
22: 27:  
23: 28: **PAISLEY, FL**  
24: 29: **32767** 30: **USA**

3: 04/13/1992  
4: 59-3119500  
5: \$8.75 Additional Fee Required  
6: \$5.00 May Be Added to Fees  
7: 05/01/1994

9. Name and Address of Current Registered Agent

JACOBS, MARGIE  
590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent

81: **BRADLEY E. ORTHMANN**  
82: **SI JVEY LANE**  
83:  
84: **PAISLEY** FL 85: **32767**

*[Handwritten Signature]*

4/30/95

- 12: D JACOBS, FLOYD  
590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL
- D JACOBS, MARGIE  
590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL
- D ORTHMANN, BRADLEY E.  
590 LAKE KATHRYN CIRCLE  
CASSELBERRY FL

13: P.T.'S  
SI JVEY LANE  
PAISLEY, FL 32767

SIGNATURE:

*[Handwritten Signature]*

4/30/95