

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # 213712 (3)

1. Corporation Name

PALM BEACH AUTO IMPORTS, INC.

Principal Place of Business

% ROBERT CUILLO
2301 OKEECHOBEE BLVD.
WEST PALM BEACH FL 33409

Mailing Address

% ROBERT CUILLO
2301 OKEECHOBEE BLVD.
WEST PALM BEACH FL 33409



2. Principal Place of Business

21 2300 Okeechobee Blvd.
Suite, Apt. #, etc.

22 City & State

23 West Palm Beach, FL

24 Zip 33409 Country U.S.

2a. Mailing Address

26 2345 Okeechobee Blvd.
Suite, Apt. #, etc.

27 City & State

28 West Palm Beach, FL

29 Zip 33409 Country U.S.

3. Date Incorporated or Qualified

07/11/1958

3a. Date of Last Report

05/01/1995

4. FEI Number

59-0837605

Applied For

Not Applicable

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

FHS CORPORATE SERVICES INC.
11780 U.S. HIGHWAY ONE
SUITE 300
NORTH PALM BEACH FL 33408

10. Name and Address of New Registered Agent

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME CUILLO, ROBERT S
STREET ADDRESS 2301 OKEECHOBEE BLVD.
CITY-ST-ZIP WEST PALM BEACH FL

TITLE T ☒ DELETE
NAME SCHLACKS, STEVEN
STREET ADDRESS 2345 OKEECHOBEE BLVD.
CITY-ST-ZIP WEST PALM BEACH FL

TITLE VPS ☐ DELETE
NAME CUILLO, ROBERT A
STREET ADDRESS 2301 OKEECHOBEE BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 2345 Okeechobee Blvd.
1.4 CITY-ST-ZIP West Palm Beach, FL 33409

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE V/AS ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2345 OKEECHOBEE BLVD
3.4 CITY-ST-ZIP 33409

4.1 TITLE T ☐ Change ☒ Addition
4.2 NAME Hotary, Michael
4.3 STREET ADDRESS 2345 Okeechobee Blvd.
4.4 CITY-ST-ZIP West Palm Beach, FL 33409

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Michael Hotary

Michael Hotary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

Date

(407) 478-3509

Daytime Phone #

CR2E034 (12/95)