

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 MAR 16 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 413065 (4)

1. Corporation Name

MAC'S AUTO AND TOOL SUPPLY, INC.

Principal Place of Business

4225 S.W. 57TH AVENUE
FT. LAUDERDALE FL 33314

Mailing Address

4225 S.W. 57TH AVENUE
FT. LAUDERDALE FL 33314

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/17/1972

3a. Date of Last Report

03/01/1994

4. FEI Number

59-1454236

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MCGLAUGHEN, RALPH G.
3061 S.W. 52 AVE.
FT. LAUDERDALE, FL 33314

10. Name and Address of New Registered Agent

81

Name

DIANE K. CRONIN

82

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

4000 S.W. 58TH TERR N FRIEDMAN

83

84

City

DAVIE

FL

85

Zip Code

33314

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, 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

Diane K. Cronin

3-13-95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	STD
NAME	CRONIN, DIANE K
STREET ADDRESS	4000 SW 58TH TERR #F
CITY-ST-ZIP	DAVIE FL
TITLE	P
NAME	MCGLAUGHEN, RALPH G.
STREET ADDRESS	3061 SW 52ND AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 00000
TITLE	V
NAME	MCGLAUGHEN, CATHERINE A.
STREET ADDRESS	2300 S.W. 35TH AVENUE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	700001433077
1.4 CITY-ST-ZIP	-03/17/95--01060--018
2.1 TITLE	***200.00 ☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
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 110.07(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:

Diane K. Cronin

DIANE K. CRONIN

2-28-95

305-581-3870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone