FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

417660

(8)

BOB'S GLASS AND RADIATOR SERVICE INC

Mailing Address

FILED Mar 24 1998 8:00am Secretary of State



11 S.W. STATE ROAD 84 FT. LAUDERDALE FL 33315		11 S.W. STATE ROAD 84 FT. LAUDERDALE FL 33315		DO NOT WRITE IN THIS	: CDACE
				Date Incorporated or Qualified 01/30/1973	SPACE
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 // W	ISTATE RD. 84	26 // W.STAT.	ERD. 84	59-2214185	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
		28 FT, LAUDERDALE, FL		Trust Fund Contribution Added to Fees	
Zip 24 333	15 25 BROWARD	29 333/5	Country 30 BROWARD	This corporation owes or has paid the cupersonal Property Tax due June 30.	rrent year Intangible Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
DAVIS, ANNE MARIE 81 Name					
7490 NW 12TH STREET 82 Street Add			dress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33317				·	
			83		
			84 City	FI FI	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					
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Agent signature req	quired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TILLMAN, PATRICK A.		1.2 NAME		;
STREET ADDRESS	208 N.E. 16TH COURT		1.3 STREET ADDRESS		l)
CITY - ST - ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	·
TITLE	VO	☐ DELETE	2.1 TITLE	_	Change Addition
NAME	-DAVIS, H. MICHAEL		2.2 NAME		1
STREET ADDRESS	7490 NW 12TH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL	The section	2. 4 CITY - ST - ZIP	<u> </u>	
TITLE	ST SAME AND A	DELETE	3.1 TITLE		Change Addition
NAME	DAVIS, ANNE M.		3.2 NAME	,	
STREET ADDRESS	7490 NW 12TH STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL	Driett	3.4. CITY-ST-ZIP		Observe Design
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change ☐ Addition
					CHANGE TO MOUNTON
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
		L DOCTIO			
NAME PTREET ADDRESS			6.2 NAME	,	
STREET ADDRESS			6 3 STREET ADDRESS		
City-St-ZiP	ertify that the information supplied with	this filing does not qualify for	64 CITY-ST-ZIP	in Section 119.07(3)(i). Fiorida Statutes. I further c	ertify that the information

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 roceiver 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: H. Michael Days 12/2016 VP 3-17-98 9545250402