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

PROFIT CORPORATION ANNUAL REPORT



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

1996

456956 **DOCUMENT #**

(2)

WALT'S AUTOMOTIVE, INC.								
Principal Place	of Business	Mailing Address	Mailing Address			J 8111 91911 BIBIR 81911 9191	i 01011 61611 !} 01	
3025 N. OLD DIXIE HWY. DELRAY BCH FL 33483		3025 N. OLD DIXIE HWY. DELRAY BCH FL 33483 US						
US		US			3. Date incorporated or Qualified 07/16/1974	3a. Date of Last F 03/03/19	· '	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	1 00,00,10	Applied For	
21		26	26		59-1563360 Not Applica		Not Applicable	
Suite, Apt. #, etc.		<u></u>	Suite, Apt. #, etc.		5. Certificate of Status Desired	7	5 Additional Required	
City & State		City & State	City & State		6. Election Campaign Financing			
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Zip Country		Zip Country		8. This corporation has liability for intangit/e tax under s. 199.032,			
24	[25] 29 30		30		Horida Statutes			
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New F	legistered Agent		
DEACLE	/ W/AI TEO E			<u> </u>				
	/, walter f Highway one		82	Street Add	et Address (P.O. Box Number is Not Acceptable)			
GRANT I			83					
			84	City		 85 Z	'ıp Code	
*				,	erroem en lagre op en governer in de skriver en	PL		
11. Pursuant to or registere	o the provisions of Sections 607.0502 ad agent, or both, in the State of Florid	arıd 607,1508, Florida St da. Such change was autl	atutes, the above- norized by the corp	named corpo location's boa	oration submits this statement for the pu and of directors. Thereby accept the app	rpose of changing its iointment as registere	registered office diagent. Lam	
familiar wit	n, and accept the obligations of, Sect	ion 607.0505, Florida Stat	utes.					
SIGNATURE _	Signature, typed or printed name of registered agent	and their applicance	(NOTE Bogisters LAg-	asy id க குழை	ed where no restatings	DATE	· ··· ·	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFF			
TITLE	ST	☐ DEVETE	1 1 THILE			Change	Addition 3	
NAME	BEASLEY, JOAN		1.2 NAME			Δ	`	
STREET ADDRESS	5585 US HIGHWAY ONE		1	ADDRESS		$\mathcal{F}\mathcal{F}$	32949	
CITY - ST - ZIP	<u> </u>		2 1 TITUE	S1 ZIP		Change	Addition	
DITLE NAME			2 2 NAME			onungo	7	
STREET ADDRESS	5585 US HIGHWAY ONE			ADDRESS		7 0		
CHY-SI-ZIP	GRANT FL		2.4 CITY-			ZIP	3 2947	
TITLE		DELFTE	3 1 THLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-7IP			3 4 CITY -	ST-21P				
TITLE		☐ DETEIF	4. 1 TILE			Change	Addition	
NAME			4.2 NAME					
STHEET ADDRESS				ADDRESS				
CHY-ST-ZIP		DELETE	4.4 Cily- 5 1 Title	S1 - 20F		Change	Add tion	
TITLE . Name		_ baten	5 2 NAME			广 ↑ <i>va ide</i>		
STREET ADDRESS				LADORESS				
CITY-ST-ZIP			5 4 0 I I Y +					
TITLE		DELETE	€ 1 TITLE			Criange	Addition	
NAME			6.2 NAME					
STREET ADDRESS			€ 3 STREE	r address				
CITY - ST - ZIP			6.4 City -	51 - 2 1P				
14. I do hereb	certify that the information supplied	with this filing is voluntarily	furnished and doc	s not qualify	for the exemption stated in Section 119	r.07(3)(k), Fiorida Stati	utes. I further	

redo negety certify that the information indicated on this annual report or suppliemental 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: 4) actu Boardy WAGER BUSLEY

PRS 3-18-96 407-137-1606