FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 JAN -1 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1995

DOCUMENT # 527102 (8)

1. JERRY'S AUTO & TRUCK CLINIC, INC.

Principal Place of Business	Mailing Address
555 N.E. 28TH COURT POMPANO BEACH FL 33064	555 N.E. 28TH COURT POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/04/1977	3a. Date of Last Report: 02/02/1994
4. FEI Number: 59-1320261	☐ 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	2a. Mailing Address
21	26
Street, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NILES, DONALD R. 2601 EAST OAKLAND PARK BLVD SUITE 400 FT. LAUDERDALE FL 33306	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 _____ (NOTE: Registered Agent's signature required when mailing) DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME BROWN, JEROME J. STREET ADDRESS 8342 N.W. 2 MANOR CITY-ST-ZIP CORAL SPRINGS FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ST NAME BROWN, GERALDINE STREET ADDRESS 8342 N.W. 2 MANOR CITY-ST-ZIP CORAL SPRINGS FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE D NAME BROWN, GERALDINE STREET ADDRESS 8342 N.W. 2 MANOR CITY-ST-ZIP CORAL SPRINGS FL	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE V NAME STORRS, JOYCE L STREET ADDRESS 709 S.W. 73RD AVENUE CITY-ST-ZIP N. LAUDERDALE FL	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I 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)(i), Florida Statutes. I further certify that the annual report 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 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerome W. Brown, Pres. 1/13/95 (305)782-2140
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #

Jerome W. Brown

010043 CP