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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DC	CUMENT	#	530631
	COMENT	"	- 23503 I

1. Corporation Name

GERMAN CAR REPAIR, INC.

Principal	Place of	Business					

## **FILED** Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90020 011 \*\*\*150.00



Principal Place of Business	Maning Address				
2501 NW 1ST AVENUE BOCA RATON FL 33431	2501 NW 1ST AVENUE BOCA RATON FL 33431		DO NOT WRITE IN T	HIS SPACE	
•			3. Date Incorporated or Qualifed 07/19/1977		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		59-1778010	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip Co 29 30	ountry	This corporation owes the current year     Personal Property Tax.	r Intangible □ Yes <b>⊠</b> No	
9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registered Agent		
BILLETER, MARGRIT C 1333 SW 13TH DRIVE		81 Name 82 Street Addre			
BOCA RATON 33486		83			
		84 City	<u></u>	EL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta	ite of Florida. Such change was authorize	ed by the corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the ap	e of changing its registered appointment as registered	

Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Change Addition 1.1 TITLE TITLE BILLETER, ROLF W 12 NAME NAME **1333 SW 13TH DRIVE** 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 2.1 TITLE TITLE BILLETER, MARGRIT C 2.2 NAME NAME **1333 SW 13TH DRIVE** STREET ADDRESS 2.3 STREET ADDRESS BOCA RATON FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition □ DELETE TITLE 6.2 NAME NAME 对它们的对对 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

CR2E034 (11/98)