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

FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90097 003 ***150.00

DOCUMENT # 561100

1. Corporation Name

----WOLEGANG'S AUTO REPAIRS, INC.

				ين حشدين					<u> </u>
Principal Place	e of Business	Mailing Address	,			, (68)83 84112	′ .		
4646 S W 75TH AVE 4646 S W 75TH AVE									
MIAMI FL 33155 MIAMI FL 33155						DO NOT WRITE IN THIS SPACE			
	1					Date Incorporated or Qualifed	IIO OI ACE		
}						03/02/1978		l	
2. Principal P	lace of Business	2a. Mailing Address	S			4. FEI Number	Apı	plied For	
21	•	26				59-1872191	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, et	lc.			5. Certificate of Status Desired	\$8.75 A	dditional	
22	•	27				5. Certificate of Status Desired	Fee Re	quired	
City & Stat	e ·	City & State				6. Election Campaign Financing	\$5.00	May Be	Ì
23		28	<u> </u>	· 			. Added to	o Fees	
Zip	Country	Zip		ountry		8. This corporation owes the current year			
24	25	29	30			Personal Property Tax.		□No	
	9. Name and Address of Curr	ent Registered Agent		- 04	Name	10. Name and Address of New Registere	ed Agent		
ED!	ER, WOLFGANG H			81	Name	·			
	6 SW 75 TH ST			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
	MI FL 33155			22					
§. 19174	7 2 00 100			83					
•				84	City		85 Zip C	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508. Florida	Statutes, the	above-	named corr			registered	
office or r	egistered agent, or both, in the State	te of Florida, Such change	was authorize	ed by th	he corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as reg	gistered	
i	im familiar with, and accept the oblig	gations of, Section 607.050	iua Sia	alules.		U 1121	99		
SIGNATURE	Signature, typed or printed name of registers a	MA-IX W	4/2						
		igenjamo utie ir applicable.	(NOTE: Register	ed Agent	signature requir	red when reinstating) VATE			· 6
12.		AND DIRECTORS	(NOTE: Register		signature requir	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO		(86/
12. TITLÉ	OFFICERS A		13		signature requin		AND DIRECTO	RS IN 12	(11/98)
	OFFICERS A PD EDLER, WOLFGANG H	AND DIRECTORS	13 ETE 1.1	3.	signature requin				Ξ
TITLE	OFFICERS A PD EDLER, WOLFGANG H 10840 S.W. 126 ST.	AND DIRECTORS	13 ETE 1.1 12	TITLE					F034 (1
TITLE NAME	PD PD EDLER, WOLFGANG H	AND DIRECTORS	13 ETE 1.1' 12 1.3	TITLE NAME	ADDRESS		☐ Change	☐ Addition	Ξ
TITLE NAME STREET ADDRESS	PD EDLER, WOLFGANG H 10840 S.W. 126 ST. MIAMI FL	AND DIRECTORS	13 ETE 1.1' 12 1.3 1.4	TITLE NAME STREET	ADDRESS				F034 (1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EDLER, WOLFGANG H 10840 S.W. 126 ST. MIAMI FL ST COOK, ANGELA	AND DIRECTORS	13 ETE 1.1 1.2 1.3 1.4 ETE 2.1	TITLE NAME STREET / CITY-ST-	ADDRESS		☐ Change	☐ Addition	F034 (1
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD EDLER, WOLFGANG H 10840 S.W. 126 ST. MIAMI FL ST COOK, ANGELA 10840 S.W. 126 ST.	AND DIRECTORS	13 ETE 1.1 12 1.3 1.4 ETE 2.1 22	TITLE NAME STREET / CITY-ST-	ADDRESS		☐ Change	☐ Addition	F034 (1
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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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: