

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:26

DOCUMENT # G18132 (2)

1. Corporation Name

JOE'S GARAGE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
% JOSEPH R. POKORNY
13510 ISLAND ROAD S.E.
FORT MYERS FL 33905
US

Mailing Address
% JOSEPH R. POKORNY
13510 ISLAND ROAD S.E.
FORT MYERS FL 33905
US

3. Date Incorporated or Qualified 01/10/1983
3a. Date of Last Report 01/21/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-2337057

Applies For
Initial Application

21. State of Incorporation

21a. State of Incorporation

5. Certificate of State Desired ☐ \$8.75 Additional Fee Required

22. City & State

22a. City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23. Zip

23a. Zip

8. The corporation has liability for intangible tax under 5-109 037,
Florida Statutes ☐ Yes ☒ No

24. Country

24a. Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

JOSEPH R. POKORNY
13510 ISLAND ROAD S.E.
FORT MYERS FL 33905

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. The agent for the principal place of business, principal office, or principal place of business of the corporation submits the statement for the purpose of changing its registered office as indicated above in both of 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 a resident of the State of Florida and I am qualified to accept service of process on behalf of the corporation.

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO THE FILING AND THE FILING FEE

NAME
POKORNY, JOSEPH R.
13510 ISLAND ROAD SE
FT. MYERS FL

1. NAME

2. STREET ADDRESS

3. CITY

4. STATE

5. ZIP

6. PHONE

7. FAX

8. E-MAIL

9. TITLE

10. DATE

11. SIGNATURE

12. DATE

13. SIGNATURE

14. DATE

15. SIGNATURE

16. DATE

17. SIGNATURE

18. DATE

19. SIGNATURE

20. DATE

SIGNATURE:

Joe Pokorny
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER IS REQUIRED FOR

1/9/95 813-693057