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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name G21318 (2)

**FILED** Jan 15 1998 8:00am Secretary of State

J&K	CLASSIC AUTO, INC.				
Principal Plac	ce of Business	Mailing Address		I IDAINII BOID FIADU IRDED IIIDE FIADE JEN D	1811 DIBIT BIBIC BIBIT BIBIT BIBIT 1981
% JOHN D. GILL 8620 S. W. 8TH STREET WEST MIAMI FL 33144-4818		% JOHN D. GILL 6620 S. W. 8TH STREET WEST MIAMI FL 33144-4818		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				02/01/1983	
_ `	Place of Business	2a. Marling Address		4. FEI Number	Applied For
21 Suite Ant	# oto	[26]		59-2257149	Not Applicable
Suite, Apt.	. #, ejc.	Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζψ	Country	8. This corporation owes or has paid	the current year Intangible
24	25		30	Personal Property Tax due June 30	and the second s
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Regis	stered Agent
	LL, JOHN D.		81 Name		
	20 S. W. 8TH STREET		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
Wi	EST MIAMI FL		63		
			63		
			84 Cily		FL 85 Zip Code
11 Dureugni	to the provisions of Sections 607 (	0502 and 607 1508. Horida Statuto	s the above named corp	poration submits this statement for the nur	- <del>-</del> , ,
office or	registered agent, or both, in the St	ate of Florida. Such change was at digations of, Section 607,0505, Flor	ithorized by the corporati	poration submits this statement for the pur ion's board of directors. I hereby accept t	he appointment as registered
SIGNATURE	teh	0.41.11		1/5	5/98
			Registered Age 4 signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFFICER	MAIL
TITLE	VD OFFICERS.	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	GILL, KATHRYN A.		1.2 NAME		
STREET ADDRESS	9631 NW 26 CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CHY-\$1-ZIP		
TITLE	PST	DELETE	21 TITLE		Change Addition
NAME	GILL, JOHN D.	•	2.2 NAME		
STREET ADDRESS	9631 N.W. 26 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY - S1 - ZIP		
TITLE	P	DELETE	3.1 Title		Change Addition
NAME	GILL, JOHN D.		3.2 NAME		
STREET ADDRESS	9631 NW 26 CT		3 3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TIFLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST- ZIP		
TITLE		☐ DELETÉ	5.3 TOLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change Addition
TITLE			6.1 THUE		
NAME OTTOGET ADODESCE			6.2 NAME		
STREET ADORESS CITY-ST-ZIP			6.3 STREET AODRESS 6.4 CRY-S1-ZIP		
			■ n 4 L(() - 5(- f))'		

14. Thereby 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.