

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G39138** (4)

1. Corporation Name

FRANKOMAR AUTO REPAIR, INC.



Principal Place of Business

Mailing Address

% FRANK O. FAGUNDO
4244 S.W. 74TH AVE.
MIAMI FL 33155

% FRANK O. FAGUNDO
4244 S.W. 74TH AVE.
MIAMI FL 33155

2. Principal Place of Business

2a. Mailing Address

State, Apt., #, etc.

State, Apt., #, etc.

City & State

City & State

Zip

Country

Zip

Country

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified 04/26/1983	3a. Date of Last Report 03/13/1995
4. FET Number 59-2285595	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

**FAGUNDO, FRANK O.
4244 S.W. 74TH AVE.
MIAMI FL 33155**

81. Name	
82. Street Address (P.O. Box Numbers Not Acceptable)	
83.	
84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0607 and 607.1008, 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 607.1009, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent

Signature of Agent Submitting Report

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. NAME	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
2. STREET ADDRESS		2. NAME			
3. CITY, STATE, ZIP		3. STREET ADDRESS			
4. TITLE	<input type="checkbox"/> DELETE	4. CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
5. NAME		5. TITLE			
6. STREET ADDRESS		6. NAME	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
7. CITY, STATE, ZIP		7. STREET ADDRESS			
8. TITLE	<input type="checkbox"/> DELETE	8. CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
9. NAME		9. TITLE			
10. STREET ADDRESS		10. NAME	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
11. CITY, STATE, ZIP		11. STREET ADDRESS			
12. TITLE	<input type="checkbox"/> DELETE	12. CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
13. NAME		13. TITLE			
14. STREET ADDRESS		14. NAME	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
15. CITY, STATE, ZIP		15. STREET ADDRESS			
16. TITLE	<input type="checkbox"/> DELETE	16. CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
17. NAME		17. TITLE			
18. STREET ADDRESS		18. NAME	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
19. CITY, STATE, ZIP		19. STREET ADDRESS			
20. TITLE	<input type="checkbox"/> DELETE	20. CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this report and/or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the manager 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 of this report or a supplemental report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)