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

DOCUMENT # H12731

CHRIS SMITH'S CREATIVE WORKSHOP MOTORCAR RESTORA TION, INC.

Principal Place	e of Business	Maning Addre	355							
% CHRIS SMITH	Н	% CHRIS SMIT	TH			{				
118 N.W. PARK STREET		118 N.W. PARI	118 N.W. PARK STREET						•	
DANIA FL 33004		DANIA FL 330	DANIA FL 33004			DO NOT WRITE IN THIS SPACE				
ı						Date Inco	rporated or Quali	fed		
						07/18/1	984			
2 Principal Pl	lace of Business	2a, Mailing A	ddress			4, FEI Numb			Ap	plied For
		H					3064	· .	No	t Applicable
21	#	26	+ + oto			33 2421	JUUT		\$8.75	
Suite, Apt.	#, etc.	Suite, Apt	i. #, G IC.			5. Certificate	of Status Desired	d 🎬	Fee Re	
22		27								·
City & State	e	City & Sta	ate			1	Campaign Financi	^{ng} □	\$5.00	- 1
23		28				Trust Fun	d Contribution		Added t	o Fees
Zip	Country	Zip		Country		8. This corp	oration owes the	current year In	tangible	
24	25	29	30			Personal	Property Tax.		Yes	□No
	9. Name and Address of Curre					10. Name an	d Address of Ne	w Registered	Agent	
	J. 10110 U.			81	Name					
SMIT	rh, Chris								<u> </u>	
	N.W. PARK STREET			82	Street Ac	ddress (P.O. Box N	umber is Not Acc	eptable)		
DANI	IA FL 33004			83						
				24	04.				85 Zip (Code
ı	α	A		84	′			FL	_ ' ' '	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State of familiar with, and abcornthe oblig	02 and 607.1508, F	londa Statutes, t	he above	e-named co	orporation submits t	his statement for	the purpose of	changing its	registered
office or re	egistered adapt, of both, in the State	of filedida. Such ch	nange was autho 07 0505, Elorida	orized by	the corpora	ation's board of dire	ectors. I hereby a	ccept the appo	intment as re	gistered
agent. i ai	m ramiliar with, and accept the outing	arrensidi, Section of	07.0305, Florida	ا ۽ سل	. 0	1 C : + h	Pres.	2 22	90	ļ
SIGNATURE	C CONTRACTOR TO THE	124/ ¥	Chris			<u>, Jmiiri</u>	1145.	<u> </u>	79	{
SIGNATURE		V	CHOTE Desi		4 010000	uland udam rainetaling)				
	Signature, typed of printed name of egistered as		(NOTE: Regi		t signature req	uired when reinstating)	C/CUANCES TO	OFFICERS AL	UD DIDECTO	DC IN 12
12.	OFFICERS A	ND DIRECTORS		13.	st signature requ	ADDITION	S/CHANGES TO	OFFICERS A		
	PD OFFICERS A	ND DIRECTORS	(NOTE: Reg	13. 1.1 TITLE	at signature requ	Secret	ary.		ND DIRECTO	RS IN 12
12.	PD OFFICERS A	ND DIRECTORS		13.	it signature req	Secret	ary.			
12.	PD OFFICERS A	ND DIRECTORS		13. 1.1 TITLE		ADDITION	ary Lori V. Park	ć St.		
12. TITLE NAME STREET ADDRESS	PD SMITH, CHRIS 118 N.W. PARK ST.	ND DIRECTORS		13. 1.1 TITLE 1.2 NAME 1.3 STREET	r address	Secret Smith	ary Lori V. Park			
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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 of supplemental annual report is true and applicate 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 of 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90045 019 ***158.75