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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J01106

(0)

A & J AUTO REPAIR CORP.

**FILED** Apr 30 1998 8:00am Secretary of State



1							
Principal Plac	e of Business	Mailing Address				311 01011 83011 01013 01011 DIUI	11 (MA)
3225 FOREST HILL BOULEVARD 3225 FOREST HILL BOULEV							
WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33			33406		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	***************************************	$\overline{}$
-					02/26/1986		
2. Principal P	lace of Business	2a. Mailing Address		• • • • •	4. FEI Number	Applied	d For
21		26			59 <u>-269</u> 3879		plicable
Suite, Apt. #, etc.		· ·	Suite, Apt. #, etc.		5. Certificate of Status Desired  \$8.75 Additional		
22		City & Chata	·		Fee Required		
23		28		Election Campaign Financing     Trust Fund Contribution	ncing \$5.00 May Be Added to Fees		
Zip			Country		8. This corporation owes or has paid t		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	g, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regis	tered Agent	
	rlop, Helen		81	Name			
	41 WOODWIND COURT		82 Street Addre		dress (P.O. Box Number is Not Acceptable)		
į LA!	KE WORTH FL 33406		0.0				
[			63	<b>'</b>			
			84	City		FL 85 Zip Code	ə
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	es the abov	e-named cor	poration submits this statement for the purp		gistered
office or r	egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was :	authorized b	v the corpora	ation's board of directors. I hereby accept the	ne appointment as regi	stered
		President	onda Statute	φ.	4-	30-98	
SIGNATURE	Signature, typed or profed name of pige hour ag	jert and title if applicable (NOT	Registered Ag	eni signature requ	aired when reinstating)	DATE	- <del>-</del>
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	PST TEDLOD LICIEN	☐ DELETE	1.1 TITLE			Change	Addition
NAME	TERLOP, HELEN 5941 WOODWIND COURT		1.2 NAME				ŀ
STREET ADDRESS	LAVE WORTH O			T ADDRESS			
CITY-ST-ZIP TITLE	V	DELETE	1.4 CITY- 2.1 TITLE	51-ZIP		Change	Addition
NAME	TERLOP, ANTHONY J.		2.2 NAME				
STREET ADDRESS	5941 WOODWIND CT		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL		2. 4 City-St-ZiP				
TITLE	DELETE		3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP				ST-ZIP		Phana	Laddillan
TITLE			4.1 TITLE			L_1 Change L_1	Addition
NAME Street address			4. 2 NAME	1 ADDRESS			
CITY-ST-ZIP			4.3 STREE 4.4 CITY -	1			
TITLE	V	DELETE	5.1 TITLE	31-211		Change	Addition
NAME			5.2 NAME	}		<b>, _</b>	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY-				
TITLE			6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			- 1

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.