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 # INGQ94

1. Corporation	on Name				
GILLEY	S AUTOMOTIVE INC.				
, and the	o no romo me mo		•	I ISONIAN DIEL ODERN HING (DIER HING) GERT BE	idi) Bidii Didii Didii didi: Bidii 1991
Principal Plac	ce of Business	Mailing Address			LOUR BIRKY DIGIT OLDIK DIRKY DIGIT IORK
l '''		4447 SOUTH MILITARY TRA	All		
		LAKE WORTH FL 33463	AIL.		
1				DO NOT WRITE IN T	HIS SPACE
]	•			3. Date Incorporated or Qualifed	
		· · · · · · · · · · · · · · · · · · ·	·	03/14/1986	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2651925	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		- 30	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
⊢ ⊸ '	— ·			8. This corporation owes the current year	r Intangible □ ☑Yes □ No
24	9. Name and Address of Current		30	Personal Property Tax. 10. Name and Address of New Register	
	V. Hallo dila radiosa di Garagia	Trogistored Agent	81 Name	10. Hains and Madress Of Helf Register	- Agoin
GILL	EY, MIKE				
4447 SOUTH MILITARY TRAIL			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	E WORTH FL 33463		83	· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			84 City	TO STATE AND AN AND AND THAT THE AND	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	es, the above-named con	poration submits this statement for the purpose	of changing its registered
office or r	registered agent, or both, in the State of	f Florida. Such change was au	thorized by the comorati	on's heard of directors. I hereby accept the an	pointment as registered
anent la	m familiar with and accept the obligation	one of Section 607 0505. Flor	ida Statutos	on a bould of directors. I floreby accept the ap	
	nm familiar with, and accept the obligation	ons of, Section 607.0505, Flor	ida Statutes.	coration submits this statement for the purpose on's board of directors. I hereby accept the ap	
agent. I a	m familiar with, and accept the obligation of the state of registered agent.		ida Statutes. Registered Agent signature require		_
SIGNATURE	•	and title if applicable. (NOTE:			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature require	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE:	Registered Agent signature require	od when reinstating). OATE	AND DIRECTORS IN 12
SIGNATURE 12.	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE	and title if applicable. (NOTE:) DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE:) DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE:) DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE	13. 1.1 TITLE	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE:) DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE	13. 1.1 TITLE	ad when reinstating); ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ad when reinstating); ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL	and title if applicable. (NOTE:) DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL LAKE WORTH FL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL LAKE WORTH FL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL LAKE WORTH FL	and title if applicable. (NOTE:) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL LAKE WORTH FL	and title if applicable. (NOTE: DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP GILLEY, MIKE 4447 S. MILITARY TRAIL LAKE WORTH FL	and title if applicable. (NOTE:) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition

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 tryster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90053 035 ***150.00

CR2E034 (11/98)