

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

FILED

Apr 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # J31121 (3)  
1. Corporation Name  
HOLLYWOOD CHASSIS CORP.



Principal Place of Business  
% ROBERT PALLADINO  
2009 N.W. 102ND TERRACE  
CORAL SPRINGS FL 33071

Mailing Address  
% ROBERT PALLADINO  
2009 N.W. 102ND TERRACE  
CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2300 S. STATE RD 7 Suite, Apt. #, etc. 22 City & State 23 MIRAMAR FL Zip 24 33023		2a. Mailing Address 25 2300 S STATE RD 7 Suite, Apt. #, etc. 27 City & State 28 MIRAMAR FL Zip 29 33023		3. Date Incorporated or Qualified 09/02/1986	
Country 25 USA		Country 29 USA		4. FEI Number 58-1694366	
				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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				10. Name and Address of New Registered Agent	

PALLADINO, ROBERT  
2009 N.W. 102ND TERRACE  
CORAL SPRINGS FL 33065

81 Name ROBERT PALLADINO
82 Street Address (P.O. Box Number is Not Acceptable) 2300 S. STATE RD 7
83
84 City MIRAMAR
85 Zip Code 33023

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Robert PALLADINO

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstalling)

4-16-98

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	PALLADINO, ROBERT	
STREET ADDRESS	2300 SOUTH STATE ROAD 7	
CITY-ST-ZIP	MIRAMAR FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE Robert PALLADINO, PRESIDENT 4-16-98 954-985-0900

CR2E034 (10/97)