

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 190263

1. Corporation	n Name				į					
AUTO BUILDERS SOUTH FLORIDA, INC.					l					
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102					ļ	DO MOT MOITE BY THE SPACE				
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 334						DO NOT WRITE IN THIS SPACE				
US		us				s Incorporated or Qualifed /27/1987				
		T = 44 N = 444				Number		Anv	died For	
	lace of Business	2a. Mailing Address		ide D	A 50	-2841086		<u> </u>	Applicable	
		Suite, Apl. #, etc.	((00)	/al D	1			\$8.75 A		
Suite, Apt.	#, etc.	27			5. Cer	tifcate of Status Desired		Fee Re	ulred .	
22 City & Stat	<u> </u>	City & State -		,	6. Eies	tion Campaign Financing		\$5.00	May Be	
23 PALL	Brach Gardenst		Gard	deus. 1		st Fund Contribution	<u>u</u> _	Added to	Fees	
Zip	Country	Zip	Cour		B. This	corporation owes the cur	rent year Inta	ngible		·**
24 33	410 25 FEUSH	29 33 410	30	USA	Pen	sonal Property Tax.		☐ Yes	□No □	
<u></u>	9. Name and Address of Current	Registered Agent			10. Nar	ne and Address of New	Registered A	gent		
]	81 Name					Ì	
	VE, ROBERT W II	•	F	82 Street A	uddress (P.O. E	Box Number Is Not Accept	able)			
10625 N MILITARY TRAIL, SUITE 102			L							
	E 102		[83					1	
PALI	M BEACH GARDENS FL 33410		ŀ	84 City				85 ZIp C	ode	
							FL.			
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Sta	tutes, the ab	ove-named o	corporation sub	mits this statement for the of directors. I hereby acce	purpose of c pt the appoint	nanging its i Iment as reg	istered	
∣ oπiceioiri	egistered agem, or bour, in the State of	ישומיים ייטונים, מטוטורו					• ••		1	
agent.ia	m familiar with, and accept the obligation	ons of, Section 607.0505,	Florida Statu	ites.					1	
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SIGNATURE	Signature, typed or printed name of registered agent is	and title if applicable. (No	OTE: Registered /		dured when reinstal	ing)	DATE			(98)
SIGNATURE	Signature, typed or printed name of registered agent of OFFICERS AND	end title if applicable. (NO	TE Registered /	Agent signature for	dured when reinstal		DATE			(11/98)
SIGNATURE 12.	Signature, typed or printed name of registered epent of OFFICERS AND	and title if applicable. (No	13.	Agent signature ne	dured when reinstal	ing)	DATE	DIRECTOR	RS IN 12	34 (11/98)
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of regulared epent of OFFICERS AND D CETTOT. KPJM S	end title if applicable. (NO	13. 1,1 TITI 1,2 HAV	Agent signature ner LE	dured when reinstal	ing)	DATE	DIRECTOR	RS IN 12	E034 (11/98)
SIGNATURE 12. TITLE NAME SIREET ADDRESS	Signature, typed of printed name of regulared apent of OFFICERS AND D CETTOT. KPJM S 14590 CRAZY HORSE LANE	and tile if applicable. (No DIRECTORS	13. 1.1 TIII 1.2 HAN	Agent signature re-	dured when reinstal	ing)	DATE	DIRECTOR	RS IN 12	R2E034 (11/98)
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-2IP	OFFICERS AND D ¢ETTOT. KPJM S 14590 CRAZY HORSE LANE PALM BEACH GARDENS FL 334	and bile if applicable. (NO DIRECTORS DIFFLETE	13. 1.1 TITI 12 HAV 1.3 STR 1.4 CIT	Agent signature re- LE ME REET ADDRESS TY-ST-ZIP	dured when reinstal	ing)	DATE	DIRECTOR	RS IN 12	CR2E034 (11/98)
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. I further certify that the informat indicated on this annual report or supplemental annual report is true and ordiner or director of the corporation of the money of the corporation of the corporation of the money of the corporation of the corporation

SIGNATURE:

Feb 25, 1999 8:00 am Secretary of State 02-25-1999 90019 042 ***150.00