

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90195 014 ***150.00

DOCUMENT # J92180

1. Entity Name
S S AND M AUTOMOTIVE, INC.



Principal Place of Business
**1075 SOUTH U.S. HIGHWAY #1
VERO BEACH, FL 32962**

Mailing Address
**1000 NORTH FEDERAL HWY
POMPANO BEACH, FL 33062**

2. Principal Place of Business
4250 N. Federal Hwy.
Suite, Apt. #, etc.

3. Mailing Address
4250 N. Federal Hwy.
Suite, Apt. #, etc.



01202005 Chg-P CR2E034 (10/03)

City & State
Lighthouse Point, FL

City & State
Lighthouse Point, FL

4. FEI Number
65-0006941

Applied For
Not Applicable

Zip
33064

Country

Zip
33064

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION COMPANY OF ORLANDO
300 S ORANGE AVE STE 1000
ORLANDO, FL 32801-4626**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
SMITH, PHILIP P.
1000 N. FEDERAL HWY
POMPANO BEACH, FL 33062** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVAT
DAYHOFF, MICHAEL R
1000 N. FEDERAL HWY
TAMPA, FL 33602** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
QUAILE, ROBERT
1000 N. FEDERAL HWY
POMPANO BEACH, FL 33062** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**4250 N. Federal Hwy.
Lighthouse Point, FL 33064** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D-V-AS-T-CFO
4250 N. Federal Hwy.
Lighthouse Point, FL 33064** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**4250 N. Federal Hwy.
Lighthouse Point, FL 33064** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael R. Dayhoff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP

4/27/05

(954) 867-1234

Date

Daytime Phone #

MICHAEL R. DAYHOFF