## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF COMPONATIONS 1996 DOCUMENT # ADVANCED AUTO TECHNICIANS, INC. Principal Place of Business Mailing Address 2688 NW 60TH AVE. 2688 NW 60TH AVE. MARGATE FL 33063 MARGATE FL 33063 3. Date Incorporated or Qualified 3a. Date of Last Report 12/31/1987 03/09/1995 4. FEI Number 2. Principal Place of Business Applied For 2a. Mailing Address 65-0028379 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired X 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TOCCO, MICHAEL JOSEPH 82 Street Address (P.O. Box Number is Not Acceptable) 2688 NW 66TH AVE 83 MARGATE FL 33063 City Zip Code 85 11. Pursuant to the provisions of Sections 607 \$502 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. Michael J. Tocco President 4-22-96 SIGNATURE. Signature, typed or printed name of registe agent and title if applicable (NOTE: Registered Agen (12/95)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Addition Vice President Change TITLE 1. 1 TITLE TOCCO, MICHAEL JOSEPH SANOTA G. TOCCO NAME 1.2 NAME CR2E034 2688 N.W. 60th Avenue **2688 NW 60TH AVE** STREET ADDRESS 1.3 STREET ADDRESS MARGATE FL Margate FL 33063 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2 1 TITLE TOCCO, MICHAEL JOSEPH NAME 2.2 NAME 2688 NW 60TH AVE STREET ADDRESS 2.3 STREET ADDRESS MARGATE FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Maddition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS 3.4 CHTY - ST - ZIP CITY-S1-ZIP DELETE THILE 4. 1 TITLE ☐ Change ■ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP □ DELETE ☐ Change 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change TITLE ☐ Addition 6. 1 TITLE NAME 6.2 NAME STHEET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is certify that the information indicated on this annual report or supplied with that I am an officer or prector of the corporation of the fellows. voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further Annual report is true and accurate and that my signature shall have the same legal effect as if made under trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name polementa

appears in Block 12 or Bl

SIGNATURE: