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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K47432 (5)

1. Corporation Name
A M AUTO SERVICE & BELLES' A/C, INC.

Principal Place of Business

3601 N.W. 19TH ST. BLDG #3
LAUDERDALE LAKES FL 33311

Mailing Address

3601 N.W. 19TH ST. BLDG #3
LAUDERDALE LAKES FL 33311

3. Date Incorporated or Qualified
11/28/1988

3a. Date of Last Report
04/25/1996

2. Principal Place of Business
21 3150 NW 17th ST.
Suite, Apt. #, etc.

22 Bay # 11
City & State

23 Ft. Lauderdale, FL
Zip

24 33311 Country
25 USA

2a. Mailing Address
26 3150 NW 17th ST.
Suite, Apt. #, etc.

27 Bay # 11
City & State

28 Ft. Lauderdale, FL
Zip

29 33311 Country
30 USA

4. FEI Number
65-0087769

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MONDI, ROSARIO T.
3601 N.W. 19TH ST., BLDG #3
LAUDERDALE LAKES FL 33311

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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: *Rosario T. Mondino*

Signature typed or printed name of registered agent and if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MONDI, ROSARIO T.
STREET ADDRESS 3601 N.W. 19TH ST. BLDG #3
CITY-ST-ZIP LAUDERDALE LAKES FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 3150 NW 17th ST. Bay #11
1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33311

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

Rosario T. Mondino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/97 (954) 739-1371
Date Daytime Phone #

0269540

CR2E034 (9/96)