

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L12122

(2)

1. Corporation Name

EXPERTECH AUTOMOTIVE, INC.

Principal Place of Business

% ANTHONY DEAN RUSIAN
10627 N.W. 53RD ST., #40
SUNRISE FL 33351

Mailing Address

% ANTHONY DEAN RUSIAN
10627 N.W. 53RD ST., #40
SUNRISE FL 33351



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/29/1989

3a. Date of Last Report

04/25/1995

4. FEI Number

65-0141394

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

RUSIAN, ANTHONY DEAN
10627 N.W. 53RD ST.
#40
SUNRISE FL 33351

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

RUSIAN, ANTHONY DEAN
10260 REFLECTION BLVD
FT LAUDERDALE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

ESTEVEZ, ROGER
4321 REFLECTINS BLVD.
SUNRISE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

REASE, JOHN DAVID
3331 NW 9TH COURT
FT LAUDERDALE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1. 1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

11630 NW 42 STREET
SUNRISE, FLA. 33323

☒ Change ☐ Addition

2. 1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

8580 NW 27 PLACE
SUNRISE, FLA. 33322

☐ Change ☐ Addition

3. 1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4. 1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5. 1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6. 1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 (954) 572-6587
Date Daytime Phone #

CR2E034 (12/95)