FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L19101 1. Corporation Name

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90257 022 ***150.00

STANUA	RD AUTO CORP.				
Principal Place	of Business	Mailing Address		- (1881/8): BB: ItBIB (BIB) HBII GBIB: HBI BIB: HBI	tiffit fifter gefter dedte dente enne
% BRADLEY P.	MESTER	% BRADLEY, P. MESTER			
5807 W PMRK F	RD	5807 W PARK RD			
HOLLYWOOD F	L 33021	HOLLYWAOQ FL 33021		DO NOT WRITE IN THIS	SPACE
ĺ				3. Date Incorporated or Qualifed	
				09/28/1989	
_ 122	ace of Business	2a. Mailing Address	BA. ES-	4. FEI Number	Applied For
21 135	O GRANTOT		RANT ST.	65-0156445	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27	_	<u> </u>	
City & State	C1	City & State	200 C/	6. Election Campaign Financing	\$5.00 May Be
23 MOL	LYWOOD, FL	28 NOLLYW	000, PC	Trust Fund Contribution	Added to Fees
^{Ziρ} 23∠	Country	- ^z 22.00 Γ	Country	8. This corporation owes the current year in	tangible ☐ Yes ☐ No
24 336			10 UPS	Personal Property Tax. 10. Name and Address of New Registered	
	9. Name and Address of Curren	t Kegistered Agent	81 Name	IU. Haine and Audiess of New Registered	- Aguir
MES	TER, BRADLEY P.	A	1		
	W PARK RD		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	LYWOOD FL 33021		83	O GRANT ST.	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			63	短时的 二式 连锁 医静脉 复数	
			84 City)		85 Zip Code
MOLLYWOOD FL 33020					
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 a	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statutes.		ł
SIGNATURE		****		when reinstating) DATE	
42	Signature, typed or printed name of registered agen	D DIRECTORS	Registered Agent signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12.	D .	DELETE	1,1 TITLE	ADDITIONAL OFFICE AND ALL OFFICE AND	Change Addition
NAME	MESTER, BRADLEY P.		—		
STREET ADDRESS			12NAME		
STREET ADURESS			1.2 NAME		
	11706 SPINNAKER WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	11706 SPINNAKER WAY COOPER CITY FL		1.3 STREET ADORESS 1.4 CITY-ST-ZIP		
TITLE	11706 SPINNAKER WAY COOPER CITY FL D	☐ DELETE	1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE NAME	11706 SPINNAKER WAY COOPER CITY FL D MESTER, DALE F.		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		
TITLE NAME STREET ADDRESS	11706 SPINNAKER WAY COOPER CITY FL D MESTER, DALE F. 11706 SPINNAKER WAY		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		
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14. 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 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, with all other like empowered.

SIGNATURE: