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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M52702

(1)

BOCA HIGH-TECH AUTOMOTIVE, INC.

Principal Piace of Business Mailing Address 2501 N.W. 1ST AVENUE 2501 N.W. 1ST AVENUE **BOCA RATON FL 33431 BOCA RATON FL 33431-6601** 3. Date Incorporated or Qualified 3a. Date of Last Report 05/26/1987 07/29/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2807855 Not Applicable Suite, Apt. #, atc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zφ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes 🗌 Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARMEL, RICHARD A. 1230 S.E. 14TH CT. Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33441** 83 84 City 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 line if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **PVST** THILF DELETE 1.1 TITLE Change Addition HARMEL, RICHARD A. NAME 1.2 NAME 1230 S.E. 14TH CT. STREET ADDRESS 1.3 STREET ADDRESS **DEERFIELD BEACH FL 33441** City - St - ZiP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS Cily - ST - Zif 2. 4 CITY - ST- ZIP TITLE DELETE 3.1 TITLE Change Addition NAMÉ 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DE LETE THLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS COLY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE \_\_\_ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-\$T-ZIP

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 justee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name

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

SIGNATURE:

appears in Block 12 or Block

CITY - ST - 7#

TYPED ON PRINTEDNAME OF BIONING OFFICER OR DIRECTOR

4/25/97 561-391-555

**FILED** 

May 02 1997 8:00am

Secretary of State

(96/6) (96/6)