## 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** 

## Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90322 044 \*\*\*150.00

## DOCUMENT # M59704

1. Corporation Name

FRIENDI	LY GARAGE, INC							
Principal Plac	e of Business	Mailing Address	<del> \</del>			/  <b>0</b>	IRER GIBIT (44)	
2311 PEMBROKE RD. 2311 PEMBROKE RD.								
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020								
					DO NOT WRITE IN THIS SPACE			1
					3. Date Incorporated or Qualifed 09/25/1987			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>	plied For	
21 _		26			59-2848617		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		ĺ
22 27						Fee Re		==
City-&`Ster	10	City & State			6. Election Campaign Financing	\$5.00		j
23	· · · · · · · · · · · · · · · · · · ·	28 7in	Country		Trust Fund Contribution	Added t	o rees	
Zip	Country	Zip 30	Country		<ol> <li>8. This corporation owes the current year</li> <li>Personal Property Tax.</li> </ol>	ar intangible Tyes	□No	
24	25 9. Name and Address of Cur		<del></del>		10. Name and Address of New Registe			ļ
	g. Name and Address of Co.	Tell Negistered Agent	81 Nai	ne	10. Name and Additional Control of the Control of th			İ
SIT	ON, MOSHE							ł
231	1 PEMBROKE RD.		82 Stre	et Addre	ss (P.O. Box Number is Not Acceptable)			]
HOLLYWOOD FL 33020			83					1
	•							
			84 City	1		FL 85 Zip (	Code	ĺ
office or	registered agent, or both, in the St am familiar with, and accept the ob	0502 and 607.1508, Flonda Statutes, t ate of Florida. Such change was autho ligations of, Section 607.0505, Florida	orized by the o	ed corpor orporation	ration submits this statement for the purpos 's board of directors. I hereby accept the a	e of changing its project the project in the projec	registered gistered	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: Reg	istered Agent signal	ure required v				á
12.	<del></del>	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER			1 5
TITLE	PD.	☐ DELETE	1.1 TITLE	1		☐ Change	Addition	=
NAME	SITTON, MOSHE		1.2 NAME					2
STREET ADDRESS			1.3 STREET ADDR	ESS				Į
CITY-ST-ZIP	N. MIAMI BEACH FL	F3.00	1.4 CITY-ST-ZIP			Change	☐ Addition	مِ إ
TITLE	STD	☐ DELETE	2.1 TITLE			Citalige	Addition	-
NAME	SITTON, MIRIAM		2.2 NAME					
STREET ADDRESS	1	· -	2.3 STREET ADOR	ESS }				l
CITY-ST-ZIP	_N. MIAMI BEACH FL		2. 4 CITY-ST-ZIP			[=] Changes	Addition:	1
TITLE	-	DELETE				ASSESSED TO THE PARTY OF THE PA	Eastel Vocamon.	
NAME			3.2 NAME					1
STREET ADDRESS			3.3 STREET ADDRI	:55				
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP	_		Change	Addition	1
TITLE	į	S VELETE				C] Onlange	C1, 100.00.	ĺ
NAME			4. 2 NAME					
STREET ADDRESS		i i	4.3 STREET ADOR	:55				}
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TITLE		- DECETE	5.1 TITLE 5.2 NAME					
NAME	,	1	5.3 STREET ADDR	FSS				
STREET AODRESS	1	1	5.4 CITY-ST-ZIP	-~				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change	Addition	1
	1		6.2 NAME	1				1
16-cmc			6.3 STREET ADDR	ESS				
GIRLLI ADDRESS	'I			1				1

6.4 CITY-ST-ZIP 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:

934-921-0293