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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M80885

(0)

COLLISION CONSULTANTS, INC.

FILED
May 15 1997 8:00am
Secretary of State



125 N. 46 AVENUE HOLLYWOOD FL 33020-3836 3. Date Incorporated or Qualified 05/16/1988 3. Date Incorporated or Qualified 05/16/1988 4. FEI Number 65-0054 195 Suite, Apt #, etc Suite, Apt #, etc City & State City & State City & State Zip Country A AVENUE HOLLYWOOD FL 33021-8601 3a. Date of Last Report 04/08/1996 Applied For Report 05/16/1988 6. Election Campaign Financing Trust Fund Contribution Added to Fees 199.032,	Principal Place of Business Mailing Address										
## HOLLYWOOD FL 33020-3556 ##	i *										
Principal Place of Flusiness 2a, Making Address 4, FER Number Applied For Replaced For Additional Replaced For Addition Replaced For Additional Replaced For Addition Replaced For					1						
2. Price project of Business 2. Making Address 4. FE Number Applied for South April 6. Election Campalign Financing \$8.75 Additional \$8.75 Additional											Report
Such Apt #, etc Subs Apt #, etc Subs Apt #, etc Subs Apt #, etc Subs Apt #, etc Status Desired Status Desired Fee Required Fee Required Status Desired Status	2. Principal	Place of Business	2a, Mailing Ad	ddress			***************************************	4. FEI Number		······································	oplied For
Section Sect	21		26					65-0054195		N	ot Applicable
Second S		ot #, etc	<u></u> ⊢¬	. #, etc.				5. Certificate of Status Desired			
20		ate		te				6. Election Campaign Financing		\$5.00	May Ra
20	23		28					, , ,			
S. Name and Address of Current Registered Agent GOTTLEB, BRUCE M. 125 N. 46 AVENUE HOLLYWOOD FL 33021 82 Street Address (P.C. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85 Zip Code 81 Address (P.C. Box Number is Not Acceptable) 80 City FL 85 Zip Code 81 Address (P.C. Box Number is Not Acceptable) 81 Address (P.C. Box Number is Not Acceptable) 82 Street Address (P.C. Box Number is Not Acceptable) 83 City FL 85 Zip Code 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 86 City FL 85 Zip Code 86 City FL 85 Zip Code 87 Address (P.C. Box Number is Not Acceptable) 88 Zip Code 89 City FL 85 Zip Code 89 City FL 85 Zip Code 80		Country	Zip		Country	У		8. This corporation has liability for in			. 199.032,
## Name ## Signature is Not Acceptable ## Name	24				30		· · · · · · · · · · · · · · · · · · ·	1			····
1.5 N. 46 AVENUE HOLLYWOOD FL 33021 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 86 Zip Code 87 City FL 86 Zip Code 88 City FL 87 Zip Code 88 City FL 88 Zip Code 88 City FL 88 Zip Code 88 City FL 88 Zip Code 98 City FL 88 Zip Code 98 City FL 87 Zip Code 98 City FL 88 Zip Code 98 Zip Code 98 City FL 88	-+		eni Registered Ager	<u></u>		· · · ·		10. Name and Address of New Reg	pistered A	gent	
HOLLYWOOD FL 33021 ### City FL 85 Zop Code ### City					181		Name				
B3					82	:	Street Addre	ess (P.O. Box Number is Not Acceptab	e)		
Big City FL 55 Zip Code	HO)LLYWOOD FL 33021				1					
The Post and 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 agent i and remain with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. OUNER, ANGELO 35 PINELAWN ROAD 15. STREET ADDRESS 16. CHANGES 16. CHANGES 17. STREET ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO OFFICERS AND DIRECTORS TO OFFICERS T					83	1					
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 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 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 or the farminal with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURI 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. THE COLVER, ANGELO 35 PINELAWN ROAD 15. STREET ADDRESS CITY-51-79 OUVER, ANGELO 35 PINELAWN ROAD MELVILLE NY 10. DELETE 11. THE 11. THE 12. Change Addition Addition ADDITIONS/CHANGES COLVERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES COLVERS AND DIRECTORS IN 12. 15. STREET ADDRESS CITY-51-79 OUVER, ANGELO 35 PINELAWN ROAD MELVILLE NY 10. DELETE 11. THE 10. Change Addition ADDITIONS/CHANGES COLVERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES COLVERS AND DIRECTORS AND DIREC					84	╁	City			85 Zip	Code
SCRATURE Strate						ı	•				
SCRATURE Strate	11. Pursuar	nt to the provisions of Sections 607.05	502 and 607,1508, FI	orida Statute	s, the abov	e-	named corp	oration submits this statement for the p	urpose of	changing i	its registered
SCRATURE Strate	agent I	am familiar with and accept the obl	igations of Section 6	07.0505, Flo	rida Statute	S.		iona board of directors. Thereby accep	i trio appo	iritirioi it as	registered
1											
DELETE		Stgriature: typed or printed name of registered a		(NOTE)€r.l	t signature require				
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	CITY-ST-ZIP				64 CITY	SY.	-ZIP				4 N

1. For necesy certify that the chlorination supplied with this hirrig does not quality for the sagnificant 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 treatee 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:

HATTURE AND TYPED OR THURST HATTE TO SIGNING OFFICER OR DIRECTOR

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