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PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200005406 (3)

ARPCO AUTO REPAIR & PAINT CO., INC.

Principal Place of Business Mailing Address 430 NW 27TH AVE. 20610 DOVE LANE FT. LAUDERDALE FL 33311 ESTERO FL 33928-3107 3. Date Incorporated or Qualified 3a. Date of Last Report 11/16/1992 03/05/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0372680 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199,032, 24 30 X Yes No 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent QUILLEN-HURON, MARY 20610 DOVE LANE 82 Street Address (P.O. Box Number is Not Acceptable) ESTERO FL 33928 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Horida Statutos, 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. Thereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505. Florida Statutos. SIGNATURE Signature, typed or printed name of tegratored agent and title it approach or (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)PD DELETE Addition TITLE 1.171118 Change HURON, DENNIS NAME 1.2 NAME 20810 DOVE LANE STREET ADDRESS 1.3 STREET ADDRESS ESTERO FL CITY-ST-ZIP 14 CIEY - \$1 - 718 DELLTE Change Addition TITLE 2.17000 QUILLEN-HURON, MARY NAME 2.2 NAME 20610 DOVE LANE STREET ADDRESS 2.3 STREET ADDRESS ESTERO FL CITY-ST-ZIP 2 4 CHY-S1-Z02 DELFTE 3.1 10 LF Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST ZIP DELETE Change 4 1 1171.1 \_\_\_ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CHY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TO LE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE TITLE 6.1 1/111 ☐ Change \_\_\_ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 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 eath, 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.