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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300000395 (2)

1. Corporation		REPAIR, INC.	ooc	,0095 (Z)									
Principal Place of Business Mailing Address								$\dashv$	E (DOURIDOR ARO PAROD ARAIL DONAL DARA DECIMA DECIMA				
\$356 MCINTOSH RD S 46 N. WASHINGTON BLVD.					'n								
SARASOTA FL 34233				SUITE 1				1	DO MOT WEITE IN THE SPACE				
US				SARASOTA FL 34236				_	DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified				
1													
2. Principal F	Place of Busines	2a.	2a. Mailing Address					01/01/1993 4. FEI Number		ΤΙΔ	pplied For		
21				26				- 1	65-0381765			lot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.						- :	\$8.75	Additional	
22				27					5. Certificate of Status Desired		Fee P	beriupel	
City & State				City & State					Election Campaign Financing     Trust Fund Contribution			) May Be I to Fees	
Zip	Zip Country			Zip			Country		8. This corporation owes or has paid the	e curren			
24	25			29 30					Personal Property Tax due June 30.			□ No	
9. Name and Address of Current Registered Agent								1	0. Name and Address of New Registe	red Age	int		
SHESLER, VICKIE L						81	Name						
46 NORTH WASHINGTON BLVD						82 Street Add			(P.O. Box Number is Not Acceptable)			····	
SUITE 1						83	<del> </del> -						
SA	VRASOTA FL 3	4236				00							
						84 City				FL	35 Zip	Code	
11. Pursuant	to the provisions	s of Sections 607.050	2 and 6	07.1508. Florida Statut	es, the a	bov	re-named cor	rporat			anging	its registered	
office or a	registered agent	, or both, in the State	of Florid	da. Such change was a Section 607 0505. Ele	authorize orida Stat	d b	y the corpora	ation's	tion submits this statement for the purpo s board of directors. I hereby accept the	appoin	lment as	s registered	
SIGNATURE		rinted name of registered ag					jent signäture regu						
12.				ND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS		RECTO	RS IN 12	
TITLE	DPS		•	☐ DELETE	1.1 11	TLE					Change	Addition	
NAME	BARRETT,	WILLIAM M			1.2 N/	AME							
STREET ADDRESS							1.3 STREET ADDRESS						
CITY-ST-ZIP	SARASOTA FL						1.4 CITY-ST-ZIP						
TITLE	DVT			☐ DELETE	2.1 TI				·	L	Change	Addition	
NAME	SAWVELL,						2.2 NAME						
STREET ADDRESS		CINTOSH ROAD					2.3 STREET ADDRESS : 2. 4 C/TY - ST - Z/P						
CITY-ST-ZIP TITLE	SARASOTA	\		DELETE	2.4C		SI-ZIP				Change	Addition	
NAME				perene	3.1 N					LI	Strange	- Avonos	
STREET ADDRESS	1						T ADDRESS						
CITY-ST-ZIP					1		ST-ZIP						
TITLE				DELETE	4.1 16	_					Change	Addition	
NAME					4. 2 N	AME							
STREET ADDRESS					4.3 ST	REET	T ADDRESS						
CITY-ST-ZIP					4.4 Ci	TY-S	ST - ZIP		·				
TITLE				DELETE	5.1 TI	TLE					Change	Addition	
NAME					5.2 N/	AME							
STREET ADDRESS					5.3 ST	REET	T ADDRESS						
CITY-ST-ZIP	<b></b>						ST-ZIP		<u> </u>			T-1	
TITLE				☐ DELETE	6.1 TI					Ш	Change	Addition	
NAME	l				6.2 NA								
STREET ADDRESS					6.3 ST	REET	TADORESS						

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.

2:11 9W But

(850) 925-2767

2.16.98

**FILED** 

Feb 23 1998 8:00am

Secretary of State