## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## P93000011481 (7) **DOCUMENT #**

GEORGE & SONS AUTO BODY, INC.

Principal Place of Business Mailing Address								
7603 - 46TH AVENUE NORTH ST. PETERSBURG FL 33709		7603 - 46TH AVENUE NORTH St. Petersburg FL 33709						
					3. Date Incorporated or Qualified 02/15/1993		Last Report 31/1995	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number		Applied For	
21 7603 46 aver 26		and the control of the state of	same		65-0384041		Not Applicable	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	Pete JL	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 337	109 25 Drelles	Ζψι <b>29</b>	Country 30			□No		
	<ol> <li>Name and Address of Current R</li> </ol>	egistered Agent		r	10. Name and Address of New R	egistered Ag	ent	
			81	Name				
DIVITO, JOSEPH A 4514 CENTRAL AVENUE			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
			83					
SI. PEII	ERSBURG FL 33711		63					
			84	City		FL	85 Zip Code	
familiar wit	ed agent, or both, in the State of Fiorida h, and accept the obligations of, Section Spentage types or protections, of registed agent and	607,0505, Florida Statutes				ointnient as re	gistered agent. I am	
12.	OFFICERS AND D	OFFE CTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND D	IRECTORS IN 12	
TITLE	D	DELETE					Change	
NAME	MARTIN, GEORGE D		1.2 NAME					
STREET ADDRESS	5400 - 66TH STREET NORTH		13 STREE	LADDRESS .				
CITY - ST - ZIP	ST. PETERSBURG FL 33709		140117-1	51 - Zir'				
TITLE	D	☐ DEFELE	2 1 TITLE				Change Addition	
NAME	MARTIN, DEBRA E		2.2 NAME					
STREET ADDRESS	5400 - 66TH STREET NORTH ST. PETERSBURG FL 33709			I ADDRESS				
CITY - ST - ZIP	31. FETENSOONG FE 33709	DELETE	24 CITY -	ST ZIP			Change Addition	
TITLE			3 1 11/1.F			L	Citatigs   Addition	
NAME Closes apposed			3.2 NAME	3.4500000				
STREET ADDRESS				1 ADDRESS				
CITY -ST - ZIP TITLE		DECETE	3.4 CHY-	51-711		Ö	Change Addition	
NAME			4.2 NAME	-		<b></b>		
STREET ADDRESS				F ADDRESS				
CITY - ST - Z:P			4.4 CHY -	·				
TIFLE		☐ DELETE	5 1 TITLE				Change Addition	
NAME			5.2 NAME	1				
STREET ADDRESS			5.3 \$ I REE	T ADORESS				

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not guelly for the exemption stated in Section 119.07(3)(k), 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 or an attachment with an address.

6.3 STHEFT ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

CHTY+ST-ZIP

STREET ADDRESS

TITLE NAME

Change Addition