

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. May
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY - 1 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000011817 (2)

1. Corporation Name

PENNY DISCOUNT MUFFLER CENTER INC.

Principal Place of Business

C/O RICHARD E. REYNOLDS
1703 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957

Mailing Address

C/O RICHARD E. REYNOLDS
1703 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **02/08/1993** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0386828** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc

23 City & State

28 City & State

24 Zip

Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REYNOLDS, RICHARD E
1703 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant 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 office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Richard E. Reynolds Pres.

Richard E. Reynolds

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **REYNOLDS, RICHARD E**
STREET ADDRESS **1368 SE ELYTON CT.**
CITY ST ZIP **PORT ST. LUCIE FL 34952**

TITLE **D**
NAME **REYNOLDS, NICKIE D**
STREET ADDRESS **1368 SE ELYTON CT.**
CITY ST ZIP **PORT ST. LUCIE FL 34952**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

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STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: *NICKIE D REYNOLDS Nickie D. Reynolds*
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

v. Pres.

4/28/95

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