

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 21 PM 2: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000024892 (0)

1. Corporation Name

S & D AUTO REPAIR, INC.

Principal Place of Business

Mailing Address

**88710 U.S. 1
TAVERNIER FL 33070**

**88710 U.S. 1
TAVERNIER FL 33070**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/05/1983

3a. Date of Last Report

08/09/1994

4. FEI Number

65-0425278

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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

9. Name and Address of Current Registered Agent

**BRENNAN, DAWN
88710 US 1
TAVERNIER FL 33070**

10. Name and Address of New Registered Agent

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BRENNAN, SHAWN
STREET ADDRESS	88710 US 1
CITY - ST - ZIP	TAVERNIER FL 33070
TITLE	D
NAME	BRENNAN, DAWN
STREET ADDRESS	88710 US 1
CITY - ST - ZIP	TAVERNIER FL 33070
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D V P	☒ Change ☐ Addition
1.2 NAME	BRENNAN, SHAWN	
1.3 STREET ADDRESS	88710 US 1	
1.4 CITY - ST - ZIP	TAVERNIER FL 33070	
2.1 TITLE	D V P	☒ Change ☐ Addition
2.2 NAME	BRENNAN DAWN	
2.3 STREET ADDRESS	88710 US 1	
2.4 CITY - ST - ZIP	TAVERNIER FL 33070	
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 do 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)(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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE:

Dawn Brennan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-95

305-832-1564
Date
Telephone Number