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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000052863 (6)

Principal Place of Business Mailing Address 2040 SOUTHWEST 42ND AVENUE GAINESVILLE FL 32608 AUTO TOUCH UP & THIM INC. Mailing Address 2040 SOUTHWEST 42ND AVENUE GAINESVILLE FL 32608-4029												
								3. Date Incorporated or Qualified		ate of Last F	•	
2. Principal P	Diago of Dusin		l on Mades	2a. Mailing Address				07/23/1993 4. FLI Number	05/01/1996 Applied For			-
	lace of pusi	Itraa	ļī					у фриоси				-
21 Suite, Apt.	# etc		26 Suite	Suite, Apt #, etc.				60 7E 4 188			lot Applicable	
22	11, 010.		h	27				5. Certificate of Status Desired			Required	
City & Stat	te		City & State				6. Election Campaign Financing			May Be		
23		•	28	28				Trust Fund Contribution Added to Fees				
Zip	Country		Zip			Country		8. This corporation has liability for intangible tax under s. 199.032,				1
24		25	29	29 30				Florida Statutes 💢 Yes 🗌 No				
9, Name and Address of Current Registered Agent							· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered .	Agent]
HE/	WNT, EUZ/	vbeth y.			i	81	Name					İ
	10 SW 42 A		•			Street Addr	ess (P.O. Box Number is Not Acceptab	le)				
GAI	INE\$VILLE	FL 32608				83	ļ					-
						84	City		FL	85 Zip	Code	
office or a agent. I a SIGNATURE	am familiar w	pent, or both, in the Sta ith, and accept the obli	gations of, Section	in 607.0505, Fl	lorida Stat	utos	S.	oration submits this statement for the p ion's board of directors. I hereby accep-	of the app	ointment as	s registered	
12.		OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	78
TITLE	D			DELETE	1.1][ILE				Change	Addition	١
NAME		ELIZABETH Y.			1.2 NA	MÉ						12
STREET ADDRESS		outhwest 42ND AV	/ENUE		1.3 \$1	1.3 STREET ADDRESS						Į,
CITY-ST-ZIP	GAINES	VILLE FL			1.4 Ci	1Y-S	1-ZIP					_ 6
TITLE	D			☐ DELETE 2						L. Change	Addition	1
NAME		ELIZABETH Y			2.2 NA							
STREET ADDRESS		OUTHWEST 42ND AV	ENUE				ADDRESS	·				
CITY-ST-ZIP	GAINES	VILLE FL 32608		DELETE			31 - 71P			Channe	Addition	4
TIYLE NAME				L Dett it	3.171					Change Change	Addition	
	1				3.2 N/	-	405.00					
STREET ADDRESS							ADDRESS					İ
CITY-ST-ZIP TITLE				DELETE	4.1 H		S1- ZIP			Change	Addition	+
NAME					4.2 N							
STREET ADDRESS					4.3 STREET ADDRESS							
CITY-ST-ZIP	1				4.3 GT							
TITLE	 			DELETE	5.1 1/		····		·	Change	Addition	1
NAME					5.2 NA	ME				-		
STREET ADDRESS						REET	ADDRESS					1
	l											1

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 logal 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.

6.3 STREET ADDRESS

6.2 NAME

DELETE

TITLE

STREET ADDRESS

CITY-ST-ZIP

352