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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

P93000054307 (2)

AUTO	AID	ΛE	MADI	EQ	INC
AUIU	МΠ	Ur.	NAPL	EQ.	INC.

CORZINE, GEORGE S JR

Principal Place of Business Mailing Address 5830 HOUCHIN STREET 5830 HOUCHIN STREET BUILDING B BUILDING B NAPLES FL 33942 NAPLES FL 33942 3. Date Incorporated or Qualified 3a. Date of Last Report 08/02/1993 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0429950 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Flection Campaign Financing \$5.00 May Be Π 23 28 Trust Fund Contribution Added to Fees Zφ Country 8. This corporation has liability for intangible tax under s 199.032 Florida Statutes W Yes No Zio 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name

5830 HOUCHIN STREET

BLDG. B

NAPLES FL 33942

83

NAPLES FL 33942

84 City

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.

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Signature, typied or printed many of registered agest and the daypin are (NUTS) Boystered Alend signature programs when non-status 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 72 DELETE TITLE 1 1 TITLE Change Addition CORZINE, GEORGE S JR NAME 1.2 NAME CR2E034 5700 HOUCHIN ST BLDG 3 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 33940 CITY - ST - ZIP 1.4 CITY ST-ZIP TITLE DELF 1E Change 2 17016 ■ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CHY+ST ZIP DELETE 3 1 TITLE Change Add tion NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY - ST - ZIP 3.4 CITY - ST - ZIP THLE DELETE 4 1 DILE Change ■ Addition NAME 4.2 NAME STREET ADORESS 4.3 STHEET ADDRESS CITY - ST - ZIP 4.4 CHY+S1 ZiP DELETE THLE 5 1 TITLE Change ☐ Addition NAME 52 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZiP DELETE TITLE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 City - \$1 - 7iP 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 119,07(3)(k). Florida Statutes I further certify that the information indicated on this armical report or suppliemental 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 13 if changed for on an attachment with an address.

SIGNATURE: Long Coming of George Corzine JR

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

941 692-0904

85

Zip Code