

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
 George B. Mather
 Secretary of State
 Division of CONCORDANCE

APPROVED
AND
FILED

COPY - 1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000086592 (1)**

[illegible]

ALL AMERICAN TRUCK & TRAILER REPAIR, INC.

2109 S. DIVISION STREET
ORLANDO FL 32805
US

2905 S. ORANGE BLOSSOM TRAIL
ORLANDO FL 32805

DO NOT WRITE IN THIS SPACE

3. Date incorporated or organized 12/20/1993	3a. Date of Last Report 05/01/1994
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05/01/1994

4. FBI Number	Applied For
50-3220493	Not Applicable

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

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

Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIRNUN, MORRIS A
2905 S. ORANGE BLOSSOM TRAIL
ORLANDO FL 32805

B1	Name	DONALD WIGTON		
B2	Street Address (P.O. Box Number is Not Acceptable)	2109 SOUTH DIVISION STREET		
B3				
B4	City	ORLANDO	FL	B5 Zip Code 32808

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 607.0503, Florida Statutes.

SIGNATURE

Donald W. [Signature]

4/25/95

12. OFFICERS AND DIRECTORS

ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1971

NAME	PS WIGTON, DONALD
ADDRESS	2109 S. DIVISION STREET
CITY	ORLANDO FL

Change Additions

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	☐ Change	☒ Addition
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DATE		☐ Change	☐ Addition
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1. 姓名: _____ 2. 性别: _____ 3. 年龄: _____ 4. 职业: _____ 5. 住址: _____ 6. 联系电话: _____ 7. 电子邮箱: _____ 8. 其他: _____	9. 签名: _____ 10. 日期: _____
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14. I do hereby certify that the information supplied with this filing is substantially true and correct, and equally true for the information stated as law for 1993 (7/1/94). I further certify that the information included in this annual report or supplemental annual report is true and is not altered and that my signature shall have the same legal effect as my signature under the laws of the state of New York. I am a director of the corporation or the receiver or trustees empowered to receive this report as required by Chapter 262, Financial Services Law, and that my duties under the laws of the state of New York are not in conflict with my duties as a director of the corporation.

SIGNATURE:

Donald Wighton
SIGNATURE AND TYPED OR PRINTED NAME OF BORING OFFICIAL OR DIRECTOR

4/25/91