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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000018473 (6)

HIGH GLOSS AUTO BODY, INC.

Principal Place	e of Business	Mailing Address			1818: 11881 IS(1) BIBIT (8888	ISNI ITO
4850 SOUTH FIFTH AVENUE ST. PETERSBURG FL 33711		4850 SOUTH FIFTH AVENUE ST. PETERSBURG FL 33711				
				3. Date incorporated or Qualified 03/04/1994	3a. Date of Last Re 04/30/1996	·
	lace of Business	28. Mailing Address		4. FEI Number	} - 1	plied For
Sulte, Apt.	# atc	Suite, Apt. #, etc.		59-3231882	40 75	t Applicable
22] Suite, Apr.	π, θιψ.	27		5. Certificate of Status Desired	Fee Re	
City & State	6	City & State		6. Election Campaign Financing	\$5.00	
23		28		Trust Fund Contribution	☐ Added t	
Zip	Country	Zıçı	Country	8. This corporation has liability for in	ntangible tax under s.	199.032.
24	25		30	Florida Statutes	Ves □ No	
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Reg	gistered Agent	
4850	H, ROBERT J SOUTH FIFTH AVENUE PETERSBURG FL 33711	a A l - A		dress (P.O. Box Number is Not Acceptabl		Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 600 0 registered agont, or both, in the Starm familiar with anti-procept the style style of the style style of the sty	gardine at Square 60 / 650b, Ho	os, the above-named co outherized by the corpor rigia Statutes: Hegistered Agent symiture rec	rporation submits this statement for the pration's board of directors. I hereby acceptions the property of the	urpose of changing it If the appointment as	-
12.		NP DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	IS IN 12
TITLE	P	☐ DELETE	1.1 TELE		Change	Addition
NAME	SMITH, ROBERT J		1.2 NAME			
STREET ADDRESS	C/O 4850 S. FIFTH AVENUE		1.3 STREET ADORESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33711		1.4 CITY+ \$1-ZIP			
TITLE		LJ DELETE	. 21 TITLE		L Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	2 4 CHY-ST-7IP		Change	Addition
NAME		ист.	3.2 NAME		L Grierigo	L_ Addition
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - S1 - ZIP			
TITLE		DELETE	4.1 TILE		Change	Addition
NAME		•	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE-	5.1 THEF	1	Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - 7:P			
TITLE		□ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME	1		
STREET ADDRESS		1	6.3 STAFET ADDRESS	/		
CITY-ST-ZIP		\sim \sim \sim \sim	6.4 SITY - \$1 - ZIP		1 E mile	
informatio	by certify that the information supply on indicated on this annual report of ifficer or director of the corporation in Block 12 or Block 13 if changed;	r supplemental annual report is tr or the receiver or truster empoy	ve and accurate and th	ed in Section 119.07(3)(i), Florida Statutes lat my signature shall have the same legal ort as required by Chapter 607, Florida St	l effect as if made und	der oath: tha