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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000026003 (1)

ALL ACTION AUTO GLASS, INC.

Principal Place of Business

Mailing Address

FILED

Apr 27 1998 8:00am

Secretary of State

TAMPA FL 33603 US 2. Principal Place of Business					TAMPA FL 33612					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified							
					2a, Mailing Address						04/05/1994 4. FEI Number					Analia	d Eor
	, ·					26 805 W HILLSBOROUGH AVE									-	Applied For Not Applicable	
Suite, Apt. #, etc				Suite, Apt. #, etc.													
22				27						5. Certificate of Status Desired Fee Required							
City & State				City & State						-	Flactica Communic	- Financina					
23				TAMPA FL.					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees								
Zip Country				Zip Country					This corporation owes or has paid the current year Intangible								
24	<u> </u>	25	,	33603 30 US					Personal Property Tax due June 30. Yes No								
		Registered Agent						10. Name and Address of New Registered Agent									
DD\	VANT VENN	HETH						81	Name	3							
BRYANT, KENNETH										Daniel Addies (D.O. Daniel and a Maria National							
805 W. HILLSBORO AVE. TAMPA FL 33603								82 Street Addre			ss (P.O. Box Number is Not Acceptable)						
170	MPA PL 330	103						83			-						
								84	City					FI	85 Zi	p Cod	0
office or r	eaistered ag	ent. or	Sections 607.0502 both, in the State of accopt the obligation	l Florid	ia Such cha	inge was a	authorize	d by	/ the co	d corpo rporatio	ratio on's t	on submits this stat board of directors.	ement for the I hereby acce	purpose	of changing pointment	j its re as regi	gistered istered
SIGNATURE			name of registered agent		,		- 6					n reinstating)		DATE			
12.	Signature, typied	DI SHINIPO	OFFICERS AND			(NUTI	13.	a Age	nt signeti	ite tedoried		ADDITIONS/CHAN	IGES TO OFF		ID DIBECT	DRS IN	112
TITLE	D		OF TIGERS AND	DITT. C		DELETE	1.1 T	TI F		1		ADDITIONS/CHAI	IGES TO OFF	OLIIO AII	Chang		Addition
NAME	BRYANT,	VENI	METLI W		_		1.2 N									_	
			BOROUGH AVE.						ADDRESS	.							
STREET ADDRESS	TAMPA F		DONOUGH NVE.						T-ZIP	`							
CITY-ST-ZIP TITLE	VP					DELETE	2.17		II- ZIP	+					Chang	e T	Addition
NAME	BRYANT,	IAAH	^C C				2.2 N									_	
STREET ADDRESS							2.3 STREET ADDRESS					77,					
'	805 W. HKLISBOROUGH AVE. TAMPA FL								ALAUNESS ST-ZIP	'				•.			
CITY-ST-ZIP TITLE	IMMINI		, , ., <u>.</u> ,			DELETE	3.1 T		DI-ZIF	+					Chang	e T	Addition
NAME							3.2 N										
STREET ADDRESS									ADDRESS	.							
									ST-ZIP								
CITY-ST-ZIP TITLE					····	DELETE	4.1 7		11-ZIF	+					Chano	e T	Addition
NAME					_		4.21										_
STREET ADDRESS									ADDRESS	.							
										`							
CITY-ST-ZIP TITLE					— П	DELETE	5.1 T		T-ZIP	+	—				Chano	e T	I Addition
NAME							5.2 N									•	
									ADDRESS	.							
STREET ADDRESS										'							
CITY+ST-ZIP TITLE						DELETE	5.4 C		T-ZIP	+				·	☐ Chang	e l	Addition
						VLLC12									والمالي ر	~	
NAME							6.2 N		400000								
STREET ADDRESS							6.3 S	IMEET	ADDRESS	'							

I 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 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

813