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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000037685

1. Corporation Name

BARON /	automotive, inc.									
Principal Place	e of Business	Mailing Address					i immilimm) sam sasti msous mosts ma	/// <b>BE</b> III <b>BUIU</b>		Alat Biri (BB)
3673 EXCHANGE AVE UNIT 3  NAPLES FL 34104  US  3673 EXCHANGE AVE UNIT 3  NAPLES FL 34104  US			NIT 3				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  05/13/1994			
2 Orinainal Di	loca of Business	2a. Mailing Address				-+	4. FEI Number		Apr	olied For
	lace of Business	<b>├</b> ─1					65-0491458		<u> </u>	Applicable
21 Suite, Apt.	# ota	26 Suite. Apt. #. etc.				-	05-049 1430		\$8.75 A	
	r, <del>6</del> 10.	27					5. Certifcate of Status Desired		Fee Red	
City & State	Α	City & State					6. Election Campaign Financing		\$5.00	May Re
23	•	28				-	Trust Fund Contribution		Added to	
Zip	Country	Zip	Cou	intry			8. This corporation owes the curr	ent vear in	tangible	
24	25 29 30			<b>0.</b> ,			Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□No
£-7	9. Name and Address of Current		1951			1	0. Name and Address of New F	Registered	Agent	
	•	<u> </u>		81	Name					
BARON, JOHN M				00	Ct+ A-	44	(P.O. Box Number is Not Accepta	able)		
5320 GRAND CYPRESS CIRLCE				82	Street Ad	aaress	(P.O. Box Number is Not Accepte	ible)		ţ
APT 201				83						
NAPLES FL 34109				L						
				84	City			FL	85 Zip C	ode
office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State of m familiar with, and accept the obligate Signature, typed or printed name of registered egen	of Florida. Such change was tions of, Section 607.0505, F	authorized Florida Stat	d by utes	the corpora	ration's	board of directors. I hereby accep	ot the appo	intment as reg	jistered
12.	OFFICERS AN	D DIRECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	P □ DELETE 1		1.1 17	1.1 TITLE					Change	☐ Addition
NAME	BARON, JERRY P		1.2 N	1.2 NAME						1
STREET ADDRESS	7544 SAN MIGUEL WAY			1.3 STREET ADDRESS						Ì
CITY-ST-ZIP	NAPLES FL 34109			1.4 CITY-ST-ZIP						
TITLE			2.1 TITLE					Change	☐ Addition	
NAME	BARON, JERRY P			AME						
STREET ADDRESS	The state of the s			TREET	ADDRESS					
- CITY-ST-ZIP	NAPLES FL-341092/4			ITY-S	T-ZP======			<del></del>		
TITLE	☐ DELETE 3.1 T		TLE					☐ Change	Addition	
NAME			3.2 N	AME	Į.					· (
STREET ADDRESS			3.3 S	TREET	T ADDRESS					1
CITY-ST-ZIP			3.4. 0	ITY-S	T- ZIP					
TITLE	DELETE 4.1		4.1 T	4.1 TITLE					☐ Change	Addition
NAME			4.21	IAME						
STREET ADDRESS			4.3 S	TREE	T ADDRESS					{
CITY-ST-ZIP				4.4 CITY-ST-ZIP					~	
TITLE		☐ DELETE	5.1 T						Change	Addition
NAME			5.2 N							-
STREET ADDRESS			5.3 S	TREET	T ADDRESS					Į
CITY-ST-ZIP				ITY-S	T-ZIP		<u> </u>			
TITLE		☐ DELETE	6.1 TI	TLE					☐ Change	☐ Addition

CITY-ST-ZIP 14. 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 exemptor 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 or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90098 022 \*\*\*150.00