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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90029 045 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000046145

WEST BOYNTON TIRE & AUTO CENTER, INC.

1					
Principal Pla	ice of Business	Mailing Address			(1 881) 681) 681 681 691 691 693 693 693 693 693 693 693 693 693 693 693 693
9811 JOG RD 1509 LYONS RD					
BOYNTON BEACH FL 33437 COCONUT CK. FL 33066			•	BO MOT MOT	
03		US		3. Date Incorporated or Qualifed	E IN THIS SPACE
				06/20/1994	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	•	26		65-0544627	Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State		6. Election Campaign Financing	55.00 May Be
23 7in	0	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the curre	
[24]	25 9. Name and Address of Curr	29 ant Registered Agent	30	Personal Property Tax.	Yes No
	3. Name and Address of Cult	ent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
PORETSKY, LLOYD					•
1509 LYONS RD.			82 Street	Address (P.O. Box Number is Not Acceptab	ile)
CO	CONUT CREEK FL 33063		83	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Control Angle Silver - 122 (19)
	· .				出海 医多种性 医原性
		•	84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the p	
011100 01	registered agent, or both, in the Stat am familiar with, and accept the oblic	.5 OF FIORDA. SUCH CHARGE WAS AL	unanzea av ine com	corporation submits this statement for the p oration's board of directors. I hereby accept	the appointment as registered
SIGNATURE		gations of, dection out.0000, Fior	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (NOTE:	Registered Agent signature r	required when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1,1 11TLE	11 40 28	Change Addition
NAME	ORETSKY, LLOYD		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS	,	
CITY-ST-ZIP	BOYNTON BEACH FL	112	1.4 CITY-ST-ZIP		•
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ORETSKY, JUDITH		2.2 NAME	, ,	•
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	W. BOYNTON BEACH FL		2.4 CITY-ST-ZIP		
TITLE	S	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	ORETSKY, JOSHUA		3.2 NAME		•
STREET ADDRESS	9811 JOG RD.	,	3.3 STREET ADDRESS	NACOTA DE COM	18.75 - 1818, 18 v. tr 2 8.75 at
CITY-ST-ZIP TITLE	W. BOYTON BEACH FL		3.4. CITY-ST-ZIP	147, 5 . 4 3 196	
	OPETOKA TODA	☐ DELETE	4.1 TITLE	· 14 李·明 "不是一定"	Change Addition
NAME	ORETSKY, TODD	17 17 17 1	4. 2 NAME	•	·
STREET ADDRESS		The State of the Control of the Control	4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BOYNTON BEACH FL	fil perere	4.4 CITY-ST-ZIP		
		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME		
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY-ST-ZIP	See	, DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	<u>) </u>	
NAME		ſ™ nere ie	6.1 111LE 6.2 NAME	•	☐ Change ☐ Addition
STREET ADDRESS	Same to		6.3 STREET ADDRESS		j
OUNCE! WINDKESS!					
CITY-ST-ZIP	<i>.</i> /(6.4 CITY-ST-ZIP		ļ

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 receiver or 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 granged, or or an apachment with an address, with all other like empowered.

SIGNATURI

954-975-0888