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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 15 1998 8:00am Secretary of State

	MENI# P	'94000081 <i>7</i> 0	)6 (1)			
ADVANCE AUTO BODY & SALES, INC.					1	
AUVA	NOE AUTO BODY	& SALES, INC.				
21 115						
Principal Place of Business Mailing Address						
1320 S. DIXIE HIGHWAY 1320 S. DIXIE HIGHWAY				200		
POMPANO BEACH FL 33060 POMPANO BEACH FL 3306				J6U	DO NOT WRITE	E IN THIS SPACE
					3. Date Incorporated or Qualified	
					11/07/1994	
2. Principal Place of Business 2a. Mailing A			ddress		4. FEI Number	Applied For
21 25		26	26		65-0531715	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27					5. Continuate of classes seemed	Fee Required
City & State City & State			te		6. Election Campaign Financing	\$5.00 May Be
23     28       29			Zip Country		Trust Fund Contribution	
<b>⊢</b> ⊣ '	25	29 ZIP	30	¬ '	This corporation owes or has participated as Personal Property Tax due June	
24		is of Current Registered Ages		<u> </u>	10. Name and Address of New Ro	
ZIMMERMAN, NORMAN D 81 Name						
	37 EAST ATLANTIC B			22 0 11	60.00	
POMPANO BEACH FL 33060				82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
1 OINI ATO BENOTTE GOOD				83		
				24 00		
				84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Section	ons 607.0502 and 607.1508, Fl	orida Statutes,	the above-named corp	poration submits this statement for the	purpose of changing its registered
office or r	egistered agent, or both, m familiar with, and acce	in the State of Florida, Such chat the obligations of Section 6	tange was aut 07.0505. Florid	horized by the corporation and the corporation of t	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE		,				
SIGNATURE	Signature, typed or printed name	ot registered agent and title if applicable	(NOTE: F	Registered Agent signature requi	red when reinstating)	DATE
12.		FICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	D D	<del></del>	DELETE	1.1 TITLE		L Change L Addition
NAME PETERSON, HENRY A JR.			1.2 NAME			
STREET ADDRESS 1320 S. DIXIE HIGHWAY  CITY-ST-ZIP POMPANO BEACH FL 33060				1.3 STREET ADDRESS		
CITY-ST-ZIP	PUMPANU BEAU		DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE			DELETE	2.1 TITLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET ADDRESS	•	1
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		_	DLLL!	3.2 NAME		
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP				3.4, City-ST-ZIP		
TITLE			DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		-
STREET ADDRESS				4.3 STREET ADDRESS		
CITY - ST - ZIP				4.4 CITY-ST-ZIP		
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		}
CITY-ST-ZIP			_	5.4 CITY-ST-ZIP		
TITLE			DELETE !	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET ADDRESS		
CITY - ST - ZIP		<del></del>		6.4 CITY-ST-ZIP		
14. I hereby	certify that the information	supplied with this filing does r	ot qualify for t	ne exemption stated in	Section 119.07(3)(i), Florida Statutes.	turther certify that the information

turate and that my signature shall have the same legal effect as it made under oath; that I am a execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

-3-98 1-954-941-6629