

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 # P94000090147

 1. Corporation Name
 DAN PURDY'S AUTO, INC.

90 MAR 17 PM 1:18

 FLORIDA DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business

 1709 S.W. 80TH WAY
 MIRAMAR FL 33023

Mailing Address

 2309 S.W. 80TH WAY
 MIRAMAR FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1994

4. FEI Number

65-0641377

 Applied For
 Not Applicable

5. Certificate of Status Desired

☐
 \$8.75 Additional
 Fee Required

 6. Election Campaign Financing,
 Trust Fund Contribution
☐
 \$5.00 May Be
 Added to Fees

 8. This corporation owes the current year Intangible
 Personal Property Tax.
☐ Yes☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

 HUNTER, E.T.
 1930 TYLER STREET
 HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

 TITLE ☐ DELETE

NAME D PURDY, DAN

STREET ADDRESS 2309 S.W. 80TH WAY

CITY-ST-ZIP MIRAMAR FL 33023

 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

 1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

 Katherine Harris
 Secretary of State

1-26-99 (954) 987-9077

Date

Day/Time Phone #

CR2E034 (11/98)