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

PROFIT CORPORATION ANNUAL REPORT

1997



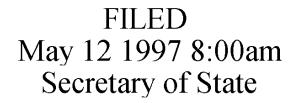
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000094048 (3)

CROOMS AUTO & TRUCK PARTS, INC.





District Charles of Decision of Charles												
Principal Place of Business Maiting Address AND DIVISION OF THE COLUMN AND												
1715 OLD DO AUBURNDALE		1715 OLD DIXIE HWY. AUBURNDALE FL 3382	3-9514									
						3. Date Incorporated or Qualified						
2. Principal	Place of Business	2a. Mailing Address	Mailing Address			4. FEI Number Applied Fo			oplied For			
21		26				59-3289422	Not Applicable					
Suite, Apt. #, etc		Suite, Apt. #, etc.	27		, , , , , , , , , , , , , , , , , , ,	5. Certificate of Status Desire				\$8.75 Additional Fee Required		
City & Sta	ate		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Country	28	Col	intry	,	Trust Fund Contribution	itu for int		****			
4	25	29	30	₁		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			199.032,			
	9. Name and Address of Cu		30	Γ		10. Name and Address of N	7.3					
JOI.	HNSON, TERRY H		·····	81	Name			· · · · · · · · · · · · · · · · · · ·				
1715 OLD DIXIE HWY.				82	Street Adc	Street Address (P.O. Box Number is Not Acceptable)						
AU	BURNDALE FL 33823		83		Oli Doli Alda	1000 (1.0.000) 10 (10.710)		, 				
				84	City			FL	85 Zip	Code		
11. Pursuan	t to the provisions of Sections 607 registered agont, or both, in the S am familiar with, and accept the c	.0502 and 607.1508, Florida St	tatutes, the a	boye	e-named cor	poration submits this statement to	r the pu		hanging r	ts registerer		
agent. I SIGNATURE	Signature, type dior fromed name of registers	ed agent and title if applicable				ared when reinstating)		DATE	. .			
12.		S AND DIRECTORS	13.			ADDITIONS/CHANGES TO	OFFICE					
Tille	DPST	DELETE	117	TLE				Ĺ	Change	Additio		
NAME	JOHNSON, TERRY H		12 N		ļ							
STREET ADDRESS			1.3 \$	TREET	ADDRESS							
CITY ST-7IF	AUBURNDALE FL 33823	T be ear			ST-ZIP				7 0	TT Addr.		
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NAME	6		2.2 N		r 4000F0C							
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NAME		0000.10	3.1 M						"1 Augusta			
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CHY-ST-ZIP					ST-ZIP							
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NAVE.			6.2 N	AME								
STREET ADDRESS	s		6.3 \$	TAEET	ADDRESS							
011V 01 310			640	ITV C	7 740							

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. | 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 tam 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.

SIGNATURE: