FILE NOW: FILING FEE AFTER MAY 1 15, \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Morinam
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P9500001716 (6)

1. Corporation DAVIE	AUTO SALES & REPAIR,	INC.	, ,					
Principal Place of Business Mailing Address					! #0#170#1 JUT #JUJ DIIII #0#ff 0#1	il Bouth Both &	/UIU7	
3424 W. DAVIE BOULEVARD : 3424 W. DAVIE BOULEVA FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 333								
						3. Date Incorporated or Qualified 01/05/1995	3a. Dat	te of Last Report
	ace of Business	2a. Maling	Address			4. FEI Number	^^	Applied For
21	H	26				65-055686	<i>50</i>	Not Applicable
Suite, Apt.	#, BIC.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	9	Orty & State			6. Election Campaign Financing		\$5.00 May Be	
23		28				Trust Fund Contribution		Added to Fees
Zip Country 25		Zip	Zip Cou 29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		tax under s. 199.032,
27	9. Name and Address of Curr		gent	1301		10. Name and Address of New		Agent
				81	Name			
	RADOVAN			82	Street Add	dress (P.O. Box Number is Not Accepta	blo)	
	. Davie Boulevard Iderdale FL 33312							
FI. LAU	DENDALE PL 33312							
				84	City		Fl	85 Zip Code
or register familiar wi	to the provisions of Sections 607.05 red agent, or both, in the State of Flo th, and accept the obligations of, Se	rida. Such chance	t was authorized	s, the above r i by the corpo	amed corporation's bo	oration submits this statement for the pu and of directors. I hereby accept the app	rpose of ct continent a	nanging its registered office is registered agent. I am
SIGNATURE	Signature typed or printed high erof regulational age	वर्ग केर 11 से हैं दहन के जी क	710°E	: Projektered Agen	Signal and respon	red when remoralings	 DATE	
12.	 OFFICERS A 	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS AN	D DIRECTORS IN 12
TITLE	PRES/SEC14/14716] DELETE	I 1 Tiffae				Change Addition
NAME	RUPAR, RADOVAN 3424 W. DAUT BLd.			1.2 NAME				
STREET ADDRESS	7424 W. DAVIE 1344. Fr. LANT. F. 3331	2		13STREET				
CITY-ST-ZIP TITLE	17. 2Aux. 11. 3731		7 DELETE	14 CHTY - S 2 1 THTLE	T - 71P			☐ Change ☐ Addition
NAME		L		2 2 NAME				☐ Change ☐ Addition
STREET ADDRESS				23 STREET	#DUDE GG			
CITY - ST - ZIP				2.4 CITY - S				
TITLE			DFLETE	3 1 TifLF				Change Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STHEET	ADDRESS			
CITY-ST-ZIP		w		3.4 CITY - S	I - ZIP			
TITLE			DELETE	4 1 THE				☐ Change ☐ Addition
NAME				4.2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY - ST - ZIP			T perere	4.4 CITY - S	- Z:P			6. 6.
TITLE		L] DELETE	5 1 TifLE				Change Addition
NAME CTOCKT ADDRESS				5.2 NAME	4057U.33			
STREET ADDRESS				53 STREET				
CITY-ST-ZIP TITLE			DELETE	54 City-S 6 1 Title	ZIP			Change Addition
NAME		L		6.2 NAME		3000018		
STREET ADDRESS				63 STREET	1	-06/24/9601	ວິ26ກີ	39
CITY-ST-ZIP				6.4 CiTy - S	- 1	***200.00	-	

14. I do hereby certify that the information supplied with this filing is vocuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 trusted my owered 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 attribute an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 (954)587-1697

CR2E034 (12/95)