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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 15 1997 8:00am

Secretary of State

Daytime Phone #

Date

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500003441 (9)

MARGATE FAST LUBE, INC.

**SIGNATURE:** 

Principal Place	of Business	Mailing Add	ress			1883/1881 118 18181 8184 85111 98111 <b>3</b> 8111	AAIR EAIDO IIIII SION EIGAI HEI	100
115 SOUTH STA MARGATE FL 33			115 SOUTH STATE ROAD 7 MARGATE FL 33068-5722			**************************************	·	
						3. Date Incorporated or Qualified 01/12/1995	3a. Date of Last Repor 05/01/1996	t
2, Principal Pla	ace of Business	2a. Mailing A	Address			4. FEI Number	Applier	d For
21		26				65-0546747	<u></u>	plicable
Suite, Apt. ( 22		Suite, Ap				5. Certificate of Status Desired	\$8.75 Addit	
City & State 23	?	City & St	ate			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Added to Fe	
Zip	Country	Zip		Countr	у	8. This corporation has liability for		).032,
24	25	[29]		30		Florida Statutes  10. Name and Address of New Re	Yes No	, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
DE. I	g, Name and Address of Co	irrent Hegistered Age	ant	81	Name	10. Name and Address of New Ne	hateled Ageill	
115	In, Stephen South State Road 7			83	<u> </u>	ress (P.O. Box Number is Not Acceptab	le)	
MARI	GATE FL 33068			8:	3	· · · · · · · · · · · · · · · · · · ·		
				84	City		FL 85 Zip Code	e
dd Characant i	a the run in one of Continue 600	7.05.00 and 607.1509.	Storedo State	ites the sho	to pamed core	poration submits this statement for the p		aistered
office or re agent. Lar	egistered agent, or both, in the financial familiar with, and accept the continuous control of the control of t	State of Florida, Such r	rhanga was	authorized h	v the corporat	tion's board of directors. I hereby accep	it the appointment as regi	stered
SIGNATURE .	Signature, type dior printed name of register	ed agent and tile if applicable	(NO	TE Registered A	gent signatura requi	red when reinstating)	DATE	
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	[	DELETE	1.1 TITLE			Change	] Addition
NAME	BELLIN, STEPHEN	_		1.2 NAME			•	
STREET ADDRESS	115 SOUTH STATE ROAD	7		1.3 STREE	T ADDRESS			
CHY-ST-ZIP	MARGATE FL 33068		T DOLLATE	1.4 CITY-	ST-ZIP		Change C	LAddition
TIME		L	DELETE	2 1 TITLE			Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				1	T ADDRESS			
CITY - ST - ZIP TITLE			DELETE	2.4 CITY 3.1 TIFLE	-81-212		Change	Addition
NAME		_		3.2 NAME	:			•
STREET ADORESS				4.5 ()	ET ADDRESS			
CITY - ST - ZIP				3.4. CITY				
THIE			DELETE	4.1 TITLE			Change	Addition
NAME				4. 2 NAM	E			
STREET AUDRESS				4.3 STRE	T ADDRESS			
CHY-ST-ZIF				4.4 CITY-	ST-ZIP			
THILE			DELETE	5.1 TITLE			Change	_ Addition
NAMé				5.2 NAME				
STREET ADDRESS				5.3 STRE	ET ADDRESS			
CITY-S1-ZIP			7 55: 57:	5 4 City				Tabane
1:11.E		Ĺ	_].DELETE	6.1 TITLE			L Change L	Addition
NAME				6.2 NAME				
STREET ADDRESS					1 ADDRESS			
CITY-SI-7-P		The state of the second		6.4 CiTY		d in Continue 110 07/00/0 Florida Continue	a. I further eastly that the	
14, I do heret informatio I am an of appears in	by certify that the information sum indicated on this ampoal report from or director of the purporation Block 13 a change.	pplied with this tiling d tar supplimental ann or or the receil for tr ed, or of ap all shows	oes not qua ual report is ustee empo nt with an ac	true and acc wered to exe ddress.	emplion state curate and that cute this repo	d in Section 119.07(3)(i). Florida Statute It my signature shall have the same lega Int as required by Chapter 607, Florida S	I effect as if made under a tatutes; and that my name	oath; that e

OF SIGNING OFFICER OR DIRECTOR