2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 28, 2005 08:00 AM DOCUMENT # P95000017702 **Secretary of State** 1. Entity Name DAYTON'S AUTO SERVICE, INC. Principal Place of Business Mailing Address 90 NW SPANISH RIVER BLVD BOCA RATON FL 33431-4221 US 90 NW SPANISH RIVER BLVD BOCA RATON FL 33431-4221 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0562476 Not Applicable Zip Country Zio Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAYTON, JOSEPH D Street Address (P.O. Box Number is Not Acceptable) 4725 BRÁNDYWINE DRIVE **BOCA RATON FL 33489-2177** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida | am familiar with, and accept the obligations of registered agent. SIGNATURE Signature hyped or printed name of registered agent and like it applicable (NOTE Registered Agen) signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THEE ☐ Addition ☐ Delete TUTLE ☐ Change DAYTON, JOSEPH D U00000246337 NAME NAME STREET ADDRESS 4725 BRANDYWINE DRIVE STREET ADDRESS 02/28/05-80061-011 150.00 CITY-ST ZIF **BOCA RATON FL 33489-2177** CHIY-ST-ZIP DVS TITLE ☐ Dejete HILE ☐ Change ☐ Addition DAYTON, LINDA NAME NAME 4725 BRANDYWINE DRIVE STREET ADDRESS STREET ADDRESS CITY ST-ZIP **BOCA RATON FL 33489-2177** CITY ST-ZIP HILE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZP TITLE ☐ Delete MILÉ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY ST-ZIP CITY-ST ZIP THILE ☐ Delete THE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZiP MILLE ☐ Delete THE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS

I. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CMY ST- AP

SIGNATURE: _

CITY ST ZIP

Joseph Difagin

Joseph D. DAYton

2-20-05

(561) 392-5075

FILED