FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA C EPARTMENT OF STATE



CORPORATION ANNUAL REPORT 1996	Sandra-B Sandra-B Surglary DIVISION OF CO	Mortnam of Sitate		
DOCUMENT # P95000 1. Corporation Name JOY'S AUTOMOTIVE, INC.	018570 (8)			
JOT S AUTOMOTIVE, INC.				
Principal Place of Business	Mailing Address	,	-	FAFAJ JIBUL FOLDI BILIH 1001 BUJI 1001
2712 PARK STREET 2712 PARK STREET LAKE WORTH FL 33460 LAKE WORTH FL 33460				
				Date of Last Report
2. Principal Place of Business	2a. Mailing Address		03/06/1995 4. FET Number	Applied For
21	26			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Oity & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28	Country	8. This corporation has liability for intan-	gible tax under s. 199.032,
24 25		30	10. Name and Address of New Regis	
9. Name and Address of Current	Registered Agent	81 Name	TO. TEATHER BITO MODIES OF THE TOTAL	.oros rigon
JOY, LORRAINE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
2712 PARK STREET		83		
LAKE WORTH FL 33460				1. 1 = 2
		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 or registered agost, or both, in the State of Florida familiar with, and accept the obligations of, Section 1.	and 607.1508, Florida Statutes, a. Such change was authorized	the above named corpora by the corporation's board	ation submits this statement for the purpose d of directors. Thereby accept the appointm	of changing its registered office nent as registered agent. I am
2 1000	n 607.0505, Florida Statutes.		Febru	72, 1996.
SIGNATURE Spreature, typied or printed name of registerical as a second		Rag iterat Againt sgnat a nequired	(when restating) ADDITIONS/CHANGES TO OFFICER	DATE
L 12 / OFFICERS AND	DIRECTORS	13.		F
NAME SIRSELADDRESS V& HARLOR DR.	Resident	1.2 NAME	erry N Joy Vic	PRes. Jent
STREET ADDRESS V& HARbOR DR. S	South	1.3 STREET ADDRESS	2130 VITEX LAND	e
CHY-SI-ZIP OCEAN RINGE FI	33435	1.4 CHY-ST-ZIF	ORTH PAlm Bed FI.	33408
TITLE	DELETE	2 1 TIBLE	oceatory & TRAC	Change Addition
NAME		2 2 NAME	RRAINE E JOY	Í
STREET ADDRESS		23 STREET ADDRESS 56	RRAINE & Joy. 144 B White Pine 1557 PAIN BEACH	Cu, and
CITY - ST-ZIP	☐ DELETE	24 CFY-S1-7P	URST PAIR ISRACK	Change Addition
TITLE NAME	Libratio	3 2 NAME		
STREET ADDRESS		3.3 STHEET ADDRESS		
CHY-SI-ZIP		3.4 CHY+S1-ZIP		
11/1/1	DELETE	4 1 THEF		Change Addition
NAME		4.2 NAME	general period p	
STREET ADDRESS		4.3 STREET ADDRESS	\$000 0174 9 -03/19/9601124 ***200.00	1999
CITY-ST-ZIP	☐ DELETE	4.4 CHY S1-7IP	***200 00	Change Addition
TITLE NAME		5.2 NAME	The second of th	
STREE! ADDRESS		5.3 STREET ADDRESS		
CITY-S1-7IP		5.4 CHY+\$1+7P		
THE	DELETE	6 1 TIT: F		Change Addition
NAME		62 NAME		> .a
STREET ADDRESS		63 STREET ADDRESS		3/17
City-St-ZiP 14. I do hereby certify that the information supplied w	rith this filing is voluntarily furnis	■ 64 CITY-St 7IP hed and does not qualify for	or the exemption stated in Section 119.07(3	3)(k), Florida Statutes, I further

roo nereby certify that the information supplied with this iming is votentially furnished and document and accurate and that in decided in decided 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 or changed, or on an attachment with an address. 2/52/96 HU7-547-5527

SIGNATURE:

CR2E034 (12/95)