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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

STREET ADDRESS

	MENT # P95000 ATION AUTO CARE & TIRE,	- ·			H BONG NOOR ONLY BAGIO WOOD ON HOE
Principal Prace of Business 11050 WILES ROAD SUITE 103 CORAL SPRINGS FL		Mailing Address	·	- Tribulturi ist said totilogi said totili bali	H SONIO INGIO GITHI BIBIR HIBBS HIN 1991
		11050 WILES ROAD SUITE 103 CORAL SPRINGS FL 33076-2104		3. Date Incorporated or Qualified 3a. Date of Last Report	
2 Principal	Place of Business	2a. Mailing Address		04/03/1995 4. FEI Number	05/01/1996 Applied For
21		26		65-0600094	Not Applicable
Suite, Ap	t #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	NA CONTRACTOR OF THE CONTRACTO	City & State			Fee Required
23	ate	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for	
24	25		30	Florida Statutes	Yes No
	9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Ro	gistered Agent
	EISSMAN, HAROLD			. Philip De Meo	
	76 PINE ISLAND RD. JITE 118			ddress (P.O. Box Number is Not Acceptal	
	ANTATION FL 33322	·	83	is a crossy	·
, .			84 City	<u> </u>	85 Zip Code
				Mantation	FL! 33324
agent t SIGNATURE	Signarive, typical of pointed name of registered age	m and tile trepplicable. (NOTE:	ida Statutes. Demeo Registered Agent signature n	equired when reinstating)	31 - 77 DATE
12.	OFFICERS AN	O DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE NAME	WATSON, JOHN	[DELETE	■ 1111111F		I I Change I I Addition I
			1		Change Addition
- STREET ADDRESS			12 NAME	•	L. Change L. Addition
STREET ADDRESS CITY-ST-ZiF	11050 WILES RD. SUITE 103		1		L.] Change L.] Addition
		DELETE	1 2 NAME 1.3 Street Address		CERS AND DIRECTORS IN 12 Change Addition Change Addition
CHY-ST-20F THEF NAME	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP	DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	Demeo, Philip] Change
CITY-ST-ZIF THEE NAME STREET ADDRESS	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP 11050 WILES RD. SUITE 103	DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	Demeo, Philip	L.] Change L.] Addition
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CHY-SI-ZIF THLE NAME STREET ADDRESS CHY-SI-ZIP THLE	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP 11050 WILES RD. SUITE 103 CORAL SPRINGS FL		1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE	Demeo, Philip	Z Vidigo
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CITY-ST-Z#F TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP 11050 WILES RD. SUITE 103 CORAL SPRINGS FL	DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	Demeo, Philip	Change Addition
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CITY-ST-Z#F TITLE NAME STREET ADDRESS CITY-ST-ZIP	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP 11050 WILES RD. SUITE 103 CORAL SPRINGS FL	DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	Demeo, Philip	Change Addition Change Addition
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CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	11050 WILES RD. SUITE 103 CORAL SPRINGS FL D DEMAO, PHILIP 11050 WILES RD. SUITE 103 CORAL SPRINGS FL	DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	Demeo, Philip	Change Addition Change Addition

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. 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 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. 954-423-3300 SIGNATURE: X

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP