

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000058200 (3)

1. Corporation Name

B & C REPAIR CO., INC.



Principal Place of Business

4311 CRYSTAL LAKE DR
SUITE 206
POMPANO BEACH FL 33064

Mailing Address

4311 CRYSTAL LAKE DR
SUITE 206
POMPANO BEACH FL 33064

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

g. Name and Address of Current Registered Agent

FILINGS, INC.
3732 NW 16TH ST
FT LAUDERDALE FL 33311

3. Date Incorporated or Qualified

07/27/1995

3a. Date of Last Report

4. FEI Number

65-0602562

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.01(3), Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as the corporation's officer or director, attach separate statement)

Date

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME: D MALINOSKY, CHARLES
STREET ADDRESS: 4300 CRYSTAL LAKE DR SUITE 206
CITY-STATE-ZIP: POMPANO BEACH FL 33064

2. TITLE ☐ DELETE

NAME: D CROWE, ROBERT
STREET ADDRESS: 4311 CRYSTAL LAKE DR
CITY-STATE-ZIP: POMPANO BEACH FL 33064

3. TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

4. TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

5. TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

6. TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE ☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE ☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE ☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE ☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

14. I, the undersigned, certify that the information supplied herein is true and accurately furnished and I do not purport to be exempted from the provisions of Section 119.07(5)(a), 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; that I am duly authorized 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.

SIGNATURE *Robert C. Crowe* V.P. & Sec. Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96 *P95000058200-0476*

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