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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Apr 20 1998 8:00am Secretary of State

	THOUSE AUTO SERVICE, IN	-)		
					(11) 1672 AVA ALVI (11)
Principal Pla	ice of Business	Mailing Address			
1258 S. MILITARY TRL #824 1258 S. MILITARY TRL			#R94		
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 3				, bo hot molte in ti	10 00 t 00
				DO NOT WRITE IN TH	IIS SPACE
				10/16/1995	
2. Principal	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-03 15307	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		_	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	[28]	Country	Trust Fund Contribution	Added to Fees
24	25	Z ip	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible
24	9, Name and Address of Curre		30	10. Name and Address of New Register	
DI	UBROW DUKER & ASSOCIATES		81 Name	_ ^ _	
2840 UNIVERSITY DR.			82 Street Add	THOMAS & GIBSD	7
CORAL SPRINGS FL 33065			" "4"(5	dress (P.O. Box Number is Not Acceptable)	YOUCRLING
			83	7	
			84 City ()		L 85 Zip Code 33043
			Ve		L 33023
11. Pursuani	it to the provisions of Sections 607.05	502 and 607.1508, Florida Stat te of Florida, Such change was	utes, the above-named cor	poration submits this statement for the purpos ation's board of directors. I hereby accept the i	e of changing its registered
agent. I	am familiar with, and accept the obli	gations of, Section 607,0505, I	Florida Statutes.	anon's board of directors. I hereby accept the	la n
SIGNATURE					(6/2)
Signature, typed or printed name of registered agent and title if applicable (NOT 12. OF FICERS AND DIRECTORS			OTE: Registered Agent signature requ	red when reinstaling) DAT ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE		PRESIDENT - SECRETARY	Change Addition
NAME	GIBSON, TOM		1.2 NAME	majorna jamanny	-
STREET ADDRESS	4000 0 100 000 000 000	24	1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL 3344		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS	; ;		2.3 STREET ADDRESS		
CITY-ST-ZIP		Deverte	2. 4 CITY-ST-ZIP		D Observe D Addition
TITLE		DELETE	8.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			11 = 11 = 11.		1
CITY+ST-ZIP	.1		4.3 STREET ADDRESS		
TITLE			4.3 STREET ADDRESS 4.4 CITY - ST- ZIP		
		DELETE	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	,	Change Addition
NAME		DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
NAME STREET ADDRESS		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	·	☐ Change ☐ Addition
			4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		- ,
STREET ADDRESS		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	,	Change Addition
STREET ADDRESS CITY-ST-ZIP			4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	,	- ,
STREET ADDRESS CITY-ST-ZIP TITLE			4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		- ,

Interept certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 open attachment with an address.