**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000019919

1. Corporation Name

ROBERT GENTILE NORTH TERMINAL GARAGE, INC.

Principal Place of Business	Mailing Address	
2531 TORTUGUS LANE FT. LAUDERDALE FL 33312	2531 TORTUGUS LANE FT. LAUDERDALE FL 33312	

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90158 029 \*\*\*300.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/05/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0734763 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zip This corporation owes the current year Intangible □No Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GENTILE, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 82 2531 TORTUGUS LANE FT. LAUDERDALE FL 33312 83 City ~ Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition □ nFLETE 11 mi F TITLE GENTILE, ROBERT J 1.2 NAME NAME 2531 TORTUGUS LANE 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ☐ Addition □ DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP . CITY-ST-ZIP Change Addition DELETE 4.1 TATLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME: 5.3 STREET ADDRESS STREET ADDRES 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 6.1 TITLE [ ] Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-7IP CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

305-681-2469 Daytime Phone #

CR2E034.(11/98)