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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600023670 (8)

B & B AUTO REPAIR OF LAKE PARK INC.

FILED Apr 09 1997 8:00am Secretary of State



Principal Plac 1360 OLD DIX LAKE PARK F		Mailing Address 1360 OLD DIXIE HIGHWAY LAKE PARK FL 33403-1913								
							3. Date Incorporated or Qualified 03/15/1996	3a. Da	ite of Last	Report
2. Principal F	lace of Business	2a.	Mailing Address				4. FEI Number			Applied For
21		26		-			65.0650821			Not Applicab
Suite, Apt.	#, etc.	27	Suite. Apt. #, etc.				5. Certificate of Status Desired		Fee I	Additional Required
City & Stat		28	City & State				6. Election Campaign Financing Trust Fund Contribution		•	May Be d to Fees
Zip	Country	-	Zip	——	Country	1	8. This corporation has liability for			s. 199.032,
24	25 9. Name and Address of Curren	29	stared Agent	30	т	· · · · · · · · · · · · · · · · · · ·	Florida Statutes L 10. Name and Address of New Re	_ Yes _		
		···			81	Name	IV. Harre and Address of New Pri	Misteran	-cyotti	
CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD.					82		ess (P.O. Box Number is Not Acceptable)			
1	ITE 211 LM BEACH GARDENS FL 33418				83					
					84	City			65 Zij	p Code
4 5	In the second of the control	00020	07.4500 55-23-003	100 "			poration submits this statement for the ation's board of directors. I hereby acce	FL		- len en-lake
SIGNATURE	arri familiar with, and accept the obligation familiar which, and accept the obligation of the obligat	nt and Ith	e il applicable (NO	TE: Regi			ured when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTO	ORS IN 12
THILE	D		DELETE		1.1 TITLE				Change	
NAMÉ	CARSILLO, ROBERT			1	1.2 NAME					
STREET ADDRESS	% 1360 OLD XIEI HIGHWAY			1	1 3 STREE	T ADDRESS				•
City-St-7IP	LAKE PARK FL 33403				1.4 CiTY ·	ST-ZIP				
TFTLE	D		DELETÉ		2.1 TITLE				Change	e 🔲 Additio
NAME	CARSILLO, BEVERLY				2.2 NAME					
STREET ADORESS				1		TADDRESS				
CITY - ST - ZIF	LAKE PARK FL 33403		DECETE		2. 4 CITY-	ST-ZIP				
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NAME				6	6.2 NAME					
STREET ADORESS				6	6.3 STREE	T ADDRESS				
CITY-ST-2IP					6 4 CITY-	ST-ZIP				

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR