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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000025626 (8)

1. Corporation Name

D&H PROFESSIONAL AUTOBODY, INC.

Principal Place of Business

3911 ELREY ROAD  
ORLANDO FL 32808

Mailing Address

3911 ELREY ROAD  
ORLANDO FL 32808-7962

2. Principal Place of Business

21 3911 Elrey Rd  
Suite, Apt. #, etc.

22 City & State  
Orlando, FL

23 Zip  
32808

Country  
USA

2a. Mailing Address

26 3911 Elrey Rd  
Suite, Apt. #, etc.

27 City & State  
Orlando, FL

28 Zip  
32808

Country  
USA

3. Date Incorporated or Qualified

03/18/1996

3a. Date of Last Report

4. FEI Number

59-3373344

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

9. Name and Address of Current Registered Agent

ROSS, WINSTON  
2341 WEKIVA RIDGE ROAD  
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name

DAVE HENRY

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

3911 Elrey Rd

83 City

Orlando, FL 32808

84 Zip Code

FL

85 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

DAVE HENRY

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

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

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PRESIDENT  
DAVE HENRY  
4563 LAURESTA DR, ORLANDO, FL 32808

SECRETARY/TREASURER  
HERPHA HENRY  
4563 LAURESTA DR, ORLANDO, FL 32808

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\*\*\*\*550.00 \*\*\*\*550.00

A. Alan  
7/9/97

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 this 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