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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600035540 (9)

LAKEVIEW SERVICE CENTER & AUTO SALES, INC.

Principal Place of Business Mailing Address			<del></del>		T I SECHERI HE IBNE BIH BEH BEH BEN	BBIBB (IIIB) BITAL BITTI BIBIT BBIT 1881	
808 W PALM ST LANTANA FL 33462		808 W PALM ST LANTANA FL 33462-2748					
					3. Date Incorporated or Qualified 04/22/1996	3a. Date of Last Report	
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26	6		(2) (XXXXX	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
		27	- L		or commente of orange posited	Fee Required	
City & State		City & State	— <sub>7</sub> ·		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country Zip Gou		Gountry		8. This corporation has liability for in Florida Statutes	yangible tax under s. 199.032, Yes \( \sum \) No	
24]	9. Name and Address of Curre		1301		10. Name and Address of New Reg		
DAL	<del></del>		81	Name	The state of the s	y	
RANARD, DENNIS R							
808 W PALM ST Lantana Fl 33462			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)		
LAN	IIANA FL 33402		83				
			-				
			84	City		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							
	Signature, typed or printed name of registered ag			it signature require	ed when reinstating)	DATE	
12.		ID DIRECTORS	13.	····	ADDITIONS/CHANGES TO OFFIC		
TITLE	D DEVINE DEVINE	☐ DELETE	1.1 11111.			☐ Change ☐ Addition	
NAME			1,2 NAME				
STREET ADDRESS	808 W PALM ST		1,3 STREET				
CITY-ST-ZIP			1,4 CHTY-ST	1-ZIP		Change Addition	
TITLE			21 TITLE			☐ Change ☐ Addition	
NAME OVEREY ADDRESS			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS			Ì	
CITY-\$T-ZIP TITLE	P DELET		2.4 CITY-ST-ZIP 3.1 TITLE			Change Addition	
NAME		out.it	3.2 NAME			Onango E Notified	
STREET ADDRESS			3.3 STREET	ADORESS			
CITY-ST-ZIP			3.4. CITY-S				
TITLE		DELETE	4.1 TITLE	1-21		Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			43 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS	\$ 5.3		5.3 STREET	ADDRESS			
CITY-ST-ZIP	<b>f</b>		5.4 CITY - ST	r-ZIP			
TITLE :		DELETE	6.1 TITLE	1		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			63 STREET	ADDRESS			

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.