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 # P9600046932 (5)

RANDY'S REPAIR, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1170 OSLO RD 1170 OSLO RD **VERO BEACH FL 32962** VERO BEACH FL 32962 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/28/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3388441 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RICHARD L. PRENDERGAST, INC. 35 43RD AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32968-2384 83 84 City Zip Code 85 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 the If applicable (NOTE: Rog stered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1 1 TITLE TITLE HARRIET JAYNES JAYNES, RANDY NAME 1.2 NAME 1170 OSLO RD 1170 OSLO RD STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH 32962 VERO BEACH FL 32962 CITY-ST-ZIP 1.4 CITY-\$1-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SY-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - \$1 - ZIP ___ Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 13 if charged, or promoting the corporation of the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or promoting the corporation of the receiver of the recei

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