

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

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000050033 (5)

1. Corporation Name

C & F COLLISION EXPERTS, INC.



Principal Place of Business

319 ANSIN BLVD
HALLANDALE FL 33009-3108
US

Mailing Address

8758 S.W. 50TH PLACE
COOPER CITY FL 33328

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 319 ANSIN BLVD

Suite, Apt. #, etc.

27 City & State

28 HALLANDALE FL

Zip Country

29 33009-3108 30 USA

3. Date Incorporated or Qualified

06/12/1996

4. FEI Number

65-0674572

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MENDONCA, FRED
8758 S.W. 50TH PLACE
COOPER CITY FL 33328

10. Name and Address of New Registered Agent

81 Name

CHRISTOPHER FARLEY

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

5010 S.W. 26TH AVE

83

APT B

84

City

DANIA FL

FL

85 Zip Code

33312

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

CHRISTOPHER FARLEY

(NOTE: Registered Agent signature required when reinstating)

MARCH-27-1998

DATE

12. OFFICERS AND DIRECTORS

TITLE PDS ☒ DELETE

NAME MENDONCA, FRED
STREET ADDRESS 8758 S.W. 50TH PLACE
CITY-ST-ZIP COOPER CITY FL

TITLE D ☐ DELETE

NAME FARLEY, CHRISTOPHER
STREET ADDRESS 540 S PARK RD., APT 35
CITY-ST-ZIP HOLLYWOOD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

CHRISTOPHER FARLEY

MARCH-27-98 (954) 451-7877

CR2E034 (10/97)