## 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 # P96000066170 (7)

WAGNER AUTOMOTIVE ENTERPRISES, INC.

## **FILED** Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4430 N.W. 12TH STREET 4430 N.W. 12TH STREET COCONUT CREEK FL 33066 COCONUT CREEK FL 33066 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0685043 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zıp Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WAGNER, RANDALL 4430 N.W. 12TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 COCONUT CREEK FL 33066 83 84 City 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 agent and title if applicable (NOTE Registored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE WAGNER, RANYD NAME 1.2 NAME 4430 NW 12TH STREET STREET ADDRESS 1.3 STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE WAGNER, BOB NAME 2.2 NAME 4096 NW 88TH AVE #2111 STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS 34 CITY-ST-ZIP CITY-ST-ZIP DELETE \_\_\_ Change ☐ Addition 41 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 DITY+ST-ZIP 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 - ST - ZIP DELETE Addition Change TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY - ST - ZIP 6.4 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 supplignental 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 receive or fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**CR2E034**