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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # P96000087415 (1)

AUTOMOTIVE SERVICE ENTERPRISES, INC.

D. S. S. S. J. Div. S.	-10	A de littre a de al al anno				PIKI qo idh (chi 180k 0600 Kide) dir 1001
Principal Place of Business Mailing Address						
3711-A WEST (TAMPA FL 336	GRACE STREET 007	3711-A WEST GR TAMPA FL 33607-		,		
					3. Date incorporated or Qualified 10/23/1996	3a. Date of Last Report
2. Principal Pl	lace of Business	2a. Mailing Addre	ess		4. FEI Number	Applied For
21		26	26		59-34120	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional
22		27			G. Continuate of Status Desired	Fee Required
City & State		City & State	-		6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Caun	try	Trust Fund Contribution	Added to Fees
Zip	├ ┐	 	30	ii y	This corporation has liability for Florida Statutes	r intangible tax under s. 199.032,
24	25] 9. Name and Address of C	29 current Registered Agent	30		10. Name and Address of New F	
Abat					0. 1 1 1 -1 - =	
	ERILAWYER CHARTERED			1	lu h. Hunter	
343 ALMERIA AVENUE OORAL GABLES FL 33134				2 Street Addr	ress (P.O. Box Number is Not Accept	2 St-
Wi	TAIL GADLES LE 30194		la la	33	M-W COL	<u>u </u>
			[8	City C	mad El	FL 85 Zip Code 07
44 Pursuant	to the provisions of Sections 60	7.0502 and 607.1508. Florid	a Statutes, the abo	L C C	poration submits this statement for the	
office or re	egistened agent, or both, in the	State of Florida Such chang	ge was authorized	by the corporat	tion's board of directors. I hereby acc	ept the appointment as registered
agent La	11 /2 11 /1	obligations of, Section 607.0	0505, Florida Statu	tes.		417/167
SIGNATURE	X el		AIOTE Desistered	Agent signature requir	and whom spinalations	7/2019/
12.	Sign etc. typed or printed name of registe	IS AND DIRECTORS	(NOTE: Registered)	-deur aldusinse tedru	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TiTLE	PSTD	DE	· · · · · · · · · · · · · · · · · · ·	F T	ADDITIONOS OF A STATE	Change Addition
NAME	HUNTER, PAUL L		1.2 NAM			
STREET ADDRESS	3711-A WEST GRACE ST	REET		EET ADORESS		
CITY-ST-7IP	TAMPA FL 33607	,,		-ST-ZIP		
THE	1/4/1/1/1/2/0001	DE				Change Addition
NAME		— 01.	2.2 NAN			
STREET ADDRESS				EET ADDRESS		
CITY - ST-ZIP			B	Y-ST-ZIP		
THUF		DE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME			3.2 NAN	ļ		
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TIRE		☐ DE				Change Addition
NAME			4. 2 NAI			
STREET ADDRESS				EET ADDRESS		
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TITLE	,	□ DE				Change Addition
NAME			5.2 NAN	· i		
STREET ADDRESS				EET ADDRESS		
CITY - S1 - ZIP				1-S1-ZIP		
TITLE		DE		~ ~~~		☐ Change ☐ Addition
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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.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRI

FILED

Jun 02 1997 8:00am

Secretary of State