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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

(501) 272-9522

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000096830 (0)

ATLANTIC AUTO GLASS OF DELRAY BEACH, INC.

Principal Place of Business Mailing Address								
3135 S. FEDERAL HWY., STE. 620 3135 S. FEDERAL HWY., S DELRAY BEACH FL 33483 DELRAY BEACH FL 33483								
						3. Date Incorporated or Qualified 11/21/1996	Sa. Date of Last F	Report
2. Principal f	Place of Business	2a. Mailing	2a. Mailing Address			4. FEI Number		pplied For
21	# a.l	26	-4 11 -5-			65-0714055		ot Applicable
Suite, Apt. 22	#, ekc	} -	Suite, Apt. #, etc.			5. Certificate of Status Desired Section Secti		
City & Stat	ee		City & State			Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		to Fees
Ζιρ	Country	Zip		Country	,	8. This corporation has liability for	intangible tax under r	s. 19 9 .032,
24	25	29		30			Yes No	
	9, Name and Address of Cu	irrent Registered Ag	ent	<u>•</u>	Name	10. Name and Address of New Re	gistered Agent	
	TO, ERIC M			•'	Name			
	5 S. FEDERAL HWY., STE. 62 RAY BEACH FL 33483	30			Street Add	reet Address (P.O. Box Number is Not Acceptable)		
VELI	NAT DEMON PL 33403				i			
				84	City		les 20	Code
						poration submits this statement for the p		
office or agent. La	registered agent, or both, in the Som familiar with, and accept the o	state of Florida Such obligations (Section	change was au 607.0505, Flor	uthorized by rida Statutes Registered Age	/ the corpora s	tion's board of directors. I hereby acce	pt the appointment as	registered
12.	113 . 1 . L		DELETE	13. 13 TITLE	·····	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	HS IN 12
NAME	Eric Pilat o 3000 Floreda Y	,		1.2 NAME			Orkings	Z-3-Juliion
STREET ADDRESS	3000 Florida Y	Brig # 100	(D)	1.3 STREET	Annerss			
CHY-SI-ZIP	Delray Beach	33483		1.4 CMY - S	1	· ·		
TITLE			DELETE	2.1 TITLE		·	Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-SI-ZIP				2.4 CITY-8	ST-ZIP			
TITLE			DELETE	3.1 TETLE			☐ Change	☐ Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	address			
CITY-ST-2IF				3.4. CiTY - 9	ST-ZIP			
TITLE		Į.	DELETE	4.1 TITLE			Change	☐ Addition
NAME				4. 2 NAME		•		
STREET ADDRESS				43 STREET				
CHY-ST 20°			DELETE	44 CITY - S 51 TITLE	T-ZIP		☐ Change	Addition
NAME		L-					□ Change	L. AUDINON
STREET ADDRESS				52 NAME 53 STREET	ADDRESC			
CITY-ST-7/P				1			•	
TillE			DELETE	54 CITY - S 61 TITLE	1 - £4F	***************************************	Change	Addition
NAME				62 NAVIE			time the state of the state of	- 140-(101)
STREET ADORESS				63 STREET	ADDRESS			
CHTY-ST-ZP				64 City - S				
14. I do here	by certify that the information sup	plied with this filing d	oes not qualify	for the exe	motion state	d in Section 119.07(3)(i), Florida Statute	s. I further certify that	the
Informatio Lam an c	on indicated on this annual report officer or director of the corporation	or supplemental ann on or the receiver or tr	ual report is tru uslee empowe	ue and accu red to exec	rate and that ute this repo	t my signature shall have the same legant as required by Chapter 607, Florida 5	il effect as if made un Statutés; and that my i	der oath; that name