

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

FILED

May 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra D. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

(4)

1. Corporation Name
HA. AUTO ELECTRIC & A/C Shop, Inc.

P97000025795

Principal Place of Business

704 W. MICHIGAN AVE.
ORLANDO, FL 32805

Adding Address

SAULS

2. Principal Place of Business

State, Apt. #, etc.

City & State

Zip Country

25

2a. Adding Address

State, Apt. #, etc.

City & State

Zip

Country

26

27

28

29

30

3. Name and Address of Current Registered Agent

Jaime Rodriguez
105 Mockingbird Ln.
Winter Springs, FL 32708

01 Name

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

03

04 City

FL

05

Zip Code

I, the undersigned, being the duly authorized officer or director of the corporation, hereby certify that the information furnished on this annual report is true and correct to the best of my knowledge and belief, and that I am a resident of this state.

SIGNATURE

Signature, printed name, title, and address of the officer or director

(If the officer or director is not a resident of this state, the signature must be that of a resident of this state)

(If the officer or director is not a resident of this state, the signature must be that of a resident of this state)

OFFICER OR DIRECTOR

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

NAME

ADDRESS

CITY, STATE, ZIP

I hereby certify that the information supplied with this report is true and correct to the best of my knowledge and belief, and that I am a resident of this state.