

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

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000075881 (7)

1. Corporation Name

D & S AUTOMOTIVE OF SOUTH FLORIDA, INC.

Principal Place of Business

C/O PRECISION TUNE
1490 WEST BROWARD BLVD
FT LAUDERDALE FL 33312

Mailing Address

C/O PRECISION TUNE
1490 WEST BROWARD BLVD
FT LAUDERDALE FL 33312



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/03/1997

4. FEI Number

65-075786

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, Etc.

26. Suite, Apt. #, Etc.

22. City & State

27. City & State

23. Zip

24. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARINELLI, JOHN V ESQ
2201 NE 52ND STREET SUITE 10
LIGHTHOUSE POINT FL 33064

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0512 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 of officer or director required when filing application

Signature of registered agent required when installing

Date

12. OFFICERS AND DIRECTORS

1. TITLE: D
2. NAME: SMOOT, TERRY
3. STREET ADDRESS: 1490 WEST BROWARD BLVD
4. CITY-STATE-ZIP: FT LAUDERDALE FL 33312

5. TITLE: ☐ DELETE
6. NAME:
7. STREET ADDRESS:
8. CITY-STATE-ZIP:

9. TITLE: ☐ DELETE
10. NAME:
11. STREET ADDRESS:
12. CITY-STATE-ZIP:

13. TITLE: ☐ DELETE
14. NAME:
15. STREET ADDRESS:
16. CITY-STATE-ZIP:

17. TITLE: ☐ DELETE
18. NAME:
19. STREET ADDRESS:
20. CITY-STATE-ZIP:

21. TITLE: ☐ DELETE
22. NAME:
23. STREET ADDRESS:
24. CITY-STATE-ZIP:

25. TITLE: ☐ DELETE
26. NAME:
27. STREET ADDRESS:
28. CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: ☐ Change ☐ Addition
2. NAME:
3. STREET ADDRESS:
4. CITY-STATE-ZIP:

5. TITLE: ☐ Change ☐ Addition
6. NAME:
7. STREET ADDRESS:
8. CITY-STATE-ZIP:

9. TITLE: ☐ Change ☐ Addition
10. NAME:
11. STREET ADDRESS:
12. CITY-STATE-ZIP:

13. TITLE: ☐ Change ☐ Addition
14. NAME:
15. STREET ADDRESS:
16. CITY-STATE-ZIP:

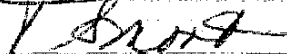
17. TITLE: ☐ Change ☐ Addition
18. NAME:
19. STREET ADDRESS:
20. CITY-STATE-ZIP:

21. TITLE: ☐ Change ☐ Addition
22. NAME:
23. STREET ADDRESS:
24. CITY-STATE-ZIP:

25. TITLE: ☐ Change ☐ Addition
26. NAME:
27. STREET ADDRESS:
28. CITY-STATE-ZIP:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0713(1), 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, upon an attachment with an address.

SIGNATURE:



1-24-98 954 2688

CR2E034 (10/97)