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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000101722 (1)

PALM BEACH REPAIR SERVICES, INC.

FILED May 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1307 SUMMIT RUN CIRCLE 1307 SUMMIT RUN CIRCLE WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, otc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. □ No 24 25 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CROMB, DANIELLE 1251 **SE** 14TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 **DEERFIELD BEACH FL 33441** 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 of 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 (NOTE: Registered Agent signature required when reinstating) Signature: typed or ponted name of registers diagoni as dititle if applicable (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELF TE Change TITLE 1.1 TITLE ANTOL, DON CR2E034 NAME 1.2 NAME 1251 SE 14TH STREET STREET ADDRESS 1.3 STREET ADDRESS **DEERFIELD BEACH FL 33441** CITY-ST-ZIP 1.4 CITY-ST-7/P DELETE Change Addition TITLE 2.1 JITLE **CORNELIUS, DWAYNE** NAME 2.2 NAME 165 HIGHLAND PARK DRIVE 2.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition THILE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-7/P CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-\$1-7IP Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-2IP 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 armual 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 of 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 attention or the accuracy and that my name appears in