


FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90106 007 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																													
DOCUMENT # P98000001432																																																																	
1. Corporation Name ANGEL'S MUFFLER SHOP INC.																																																																	
Principal Place of Business 2758 N. MICHIGAN AVENUE D-9 KISSIMMEE FL 34744			Mailing Address 2758 N. MICHIGAN AVENUE D-9 KISSIMMEE FL 34744																																																														
2. Principal Place of Business 21		2a. Mailing Address 28		3. Date Incorporated or Qualified 01/05/1998																																																													
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-3497831																																																													
City & State 23		City & State 28		Applied For <input type="checkbox"/> Not Applicable																																																													
Zip 24		Zip 29		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																													
Country 25		Country 30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																																																													
9. Name and Address of Current Registered Agent ORTIZ, ANGEL 2758 N. MICHIGAN AVENUE D-9 KISSIMMEE FL 34744			10. Name and Address of New Registered Agent 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 607.0502 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																	
12. OFFICERS AND DIRECTORS																																																																	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: Angel Ortiz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/99

Date

(407) 345-4159

Daytime Phone

CR2E034 (11/98)