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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kather ne Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90102 013 ***158.75

DOCUMENT #	P98000056095
. Corporation Name	. 0000000000

A & F MOTORS, INC.

Principal Place	e of Business			Mailing Ad	ddress					£ 19831881 148 \$818) 1814) 88111 88111	 	inis a a thii aa t	18 (8) 8 8 8 1 1 1 1 1 1
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PALM BAY FL				PALM BAY									
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										Incorporated or Qualifed			
										22/1998			
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21				26					5	9-356773	7		lot Applicable
Suite, Apt.	#, etc.			Suite,	Apt. #, etc.					ifcate of Status Desired	4		Additional
22				27			_		J. CEIT			Fee F	Recuired
City & State	е			City &	State				6. Elec	tion Campaign Financing	П	\$5.00	May Be
23				28					Trus	t Fund Contribution		Added	to Fees
Zip		Count	гу	Zip		Coun	try		8. This	corporation owes the curre	nt year Inta		
24	[:	25		29		30				son al Property Tax.		Yes	[946]
	9. Name	and Add	ess of Current	Registered A	Agent				10. Nan	ne and Address of New Re	egistered /	Agent	
						1	31 N	ame					
	amil, azza					ļ,	32 S	treet Addr	ress (P.O. F	Box Number is Not Acceptab)le)		
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PALI	M BAY FL 3	2905				1	33						
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						1	34 C	ity			FI	85 Zip	Code
44 Dusquast	to the provice	one of Sc	ctions 607 0502	and 607 1508	8 Florida Statu	es the abs	ove-na	med corp	oration sub	mils this statement for the p	urpose of	changing i	ts registered
office or re	registered and	ant or boil	h in the State of	f Florida, Suct	h change was a	iuthorized	by the	corpore tic	on's board	of cirectors. I hereby accept	the appoir	ntment as i	reg stered
agent a	ım familiar wit												
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SIGNATURE					n 607.0505, Flo	orida Statut	es.				DATE		
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14. I hereby certify that the informa ion 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 annual report or supplemental annual report is true and accurate and that my signat are 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 changes, or on an attact ment with an address, with all other like empowered.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

NAME

DELETE

☐ Addition