

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000056570  
1. Corporation Name

AUTOMOTIVE SERVICE CENTERS, INC.

Principal Place of Business Mailing Address  
100 West Kennedy Boulevard  
Suite 740  
Tampa, Florida 33602

Principal Place of Business 13041 Automobile Blvd.	2a. Mailing Address 26	4. FEI Number 59-3522166	3a. Date of Last Report N/A
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	Applied For Not Applicable
City & State Clearwater, Florida	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Zip 33762	Country 25	Zip 29	Country 30
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

Leslie W. Hudock  
601 Bayshore Boulevard  
Suite 700  
Tampa, FL 33606

10. Name and Address of New Registered Agent

81 Name David A. Kitenplon  
82 Street Address (P.O. Box Number is Not Acceptable)  
13041 Automobile Boulevard  
83  
84 City Clearwater FL 85 Zip Code 33762

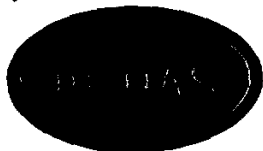
I, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 607.0505, Florida Statutes.

GNATURE David A. Kitenplon June 29, 1999  
(NOTE: Registered Agent signature required when resigning)

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE D 1.2 NAME UITERWYK, STEVEN A. 1.3 STREET ADDRESS 100 W KENNEDY BLVD STE 740 1.4 CITY-ST-ZIP TAMPA FL 33602	<input checked="" type="checkbox"/> DELETE	1.1 TITLE D/CEO 1.2 NAME ORNS, LONNIE T. 1.3 STREET ADDRESS 13041 Automobile Blvd. 1.4 CITY-ST-ZIP Clearwater, FL 33762	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE S/NP 2.2 NAME KITENPLON, DAVID A. 2.3 STREET ADDRESS 13041 Automobile Blvd. 2.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> DELETE	2.1 TITLE D 2.2 NAME LASHNER, STUART 2.3 STREET ADDRESS 13041 Automobile Blvd. 2.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE D 3.2 NAME SIMMONS, JOHN 3.3 STREET ADDRESS 13041 Automobile Blvd. 3.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> DELETE	3.1 TITLE D 3.2 NAME SIMMONS, JOHN 3.3 STREET ADDRESS 13041 Automobile Blvd. 3.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE D 4.2 NAME ORNS, LONNIE T. 4.3 STREET ADDRESS 13041 Automobile Blvd. 4.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> DELETE	4.1 TITLE D 4.2 NAME ORNS, LONNIE T. 4.3 STREET ADDRESS 13041 Automobile Blvd. 4.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE D 5.2 NAME ORNS, LONNIE T. 5.3 STREET ADDRESS 13041 Automobile Blvd. 5.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> DELETE	5.1 TITLE D 5.2 NAME ORNS, LONNIE T. 5.3 STREET ADDRESS 13041 Automobile Blvd. 5.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE D 6.2 NAME ORNS, LONNIE T. 6.3 STREET ADDRESS 13041 Automobile Blvd. 6.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> DELETE	6.1 TITLE D 6.2 NAME ORNS, LONNIE T. 6.3 STREET ADDRESS 13041 Automobile Blvd. 6.4 CITY-ST-ZIP Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

I do hereby 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 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.

GNATURE: Lonnie T. Orns, CHIEF EXECUTIVE OFFICER June 29, 1999  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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Automotive Service Centers, Inc.  
D/B/A Midas Auto Systems Experts

Executive Offices  
13041 Automobile Boulevard  
Clearwater, Florida 33762  
Tel. (727) 572-7440  
Fax (727) 572-5007

June 29, 1999

Florida Department of State  
Division of Corporations

Re: 1999 Corporation Annual Report

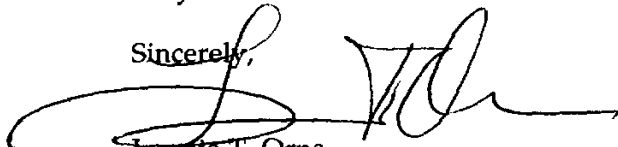
To Whom It May Concern:

Please find enclosed the revised 1999 Corporation Annual Report for Automotive Service Centers, Inc.

The original report was filed on behalf of Automotive Service Centers, Inc., on April 20, 1999. We just became aware that the report was returned for additional information to the former director's address, who failed to revise and return the 1999 Annual Report for filing as requested, after his removal from office.

We would like to ask for your consideration with the circumstances outlined above which resulted in a late filing of this report. If you should require any additional information, please contact me at 727-572-7440. Thank you in advance for your assistance with this matter.

Sincerely,



Lonnie T. Orns  
Chief Executive Officer

LO/ksf

Enclosures: 1999 Corporation Annual Report - Revised  
1999 Corporation Annual Report - Original