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

**PROFIT CORPORATION** ANNUAL REPORT 4 19<u>99</u>



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000100621

1. Corporation Name

STREET ADDRESS CITY-ST-ZIP

LE BONBERGER AUTO REPAIR AND SALES CORPORATION

						<b>—</b>		H <b>aa</b> nn <b>ag</b> an <b>a</b> yna y	881 HAN HAN
Principal Place	of Business	Mailing Add	ress						
325 W WASHINGTON ST STE A9 1325 W WASHINGTON ST STE A9						1			
PLANDO FL 32	805-1776	orlando fl	ORLANDO FL 32805-1776			1	DO NOT WRITE IN THIS SPACE		
						3	Date Incorporated or Qualifed		
,							1/30/1998		
2 Deineinel Di	lana of Business	2a. Mailing A	Addross				FEI Number	Ani	plied For
Z. Principal Pi	ace of Business		-uu 655			-	59 RULE 179	——— <u>——————————————————————————————————</u>	t Applicable
Suite, Apt.	# oto	26 Suite Ar	nt # etc			<del></del>	2/2/4047/	\$8.75 A	
	#, etc.	— <u> </u>	Suite, Apt. #, etc.			5.	Certificate of Status Desired	Fee Re	
22 City & State		City & S	tate				Election Campaign Financing	\$5.00	May Ro
23	•	28		•		0.	Trust Fund Contribution	Added to	,
Zip	Country	Zip		Country		8	This corporation owes the current year	Intangible	
24	25 29 30			_	Personal Property Tax.			ØNo	
9. Name and Address of Current Registered Agent							Name and Address of New Register	ed Agent	
				81	Name				
DESIR	, LENET						O. D. M. Lee's New Assessable		
1325	W WASHINGTON ST STE A9			82	Street A	aaress (P	O. Box Number is Not Acceptable)		
ORLA	NDO FL 32805-1776	•		83				<del>-</del>	
				84	City		F	85 Zip C	Code
44 Durawant	to the provisions of Sections 607.	0502 and 607 1508	Florida Statutes 1	he abov	e-named c	corporation	submits this statement for the purpose	of changing its	registered
office or n	egistered agent, or both, in the Sta	ate of Florida. Such o	change was autho	rized by	the corpor	ration's bo	ard of directors. I hereby accept the ap	pointment as reg	gistered
agent. I a	m familiar with, and accept the ob	ligations of, Section (	307.0505, Florida	Statutes	•				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Per	istered Anni	nt signature rec	quired when re	aiostatino) DATE		
12.		AND DIRECTORS	(11012.1189	13.	n signato e rot	-	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	Director		DELETE	1.1 TITLE				☐ Change	Addition
NAME	Director,	~ `~		1.2 NAME					
STREET ADDRESS	Lener De	shuncton	St.		T ADDRESS				
	1325 W. WO	Sing of the	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1.4 CITY-S					i
CITY-ST-ZIP TITLE	OFFICIAL F	1. 268	DELETE	2.1 TITLE	1-20			☐ Change	☐ Addition
		'	_,	2.2 NAME	-			-	_
NAMÉ					TADDRESS				
STREET ADDRESS									
CITY-ST-ZIP		<del></del>	DELETE	2.4 CITY-5	51-ZIP			☐ Change	Addition
TITLE				3.1 TITLE 3.2 NAME					
NAME	- ~				TADODESS				
STREET ADDRESS			1		TADDRESS				
CITY-ST-ZIP			DELETE	3.4. CITY-5	ST-ZIP			Change	☐ Addition
TITLE		'	□ nereie	4.1 TITLE	Ì				(
NAME				4. 2 NAME					
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP			December 1	4.4 CITY-S	T-ZIP			☐ Change	Addition
TITLE			DELETE	5.1 TITLE					
NAME				5.2 NAME					
STREET ADDRESS					T ADDRESS				
CTTY-ST-ZIP				5.4 CITY-S	T-ZIP				<b>— 4</b> 3 36. –
TITLE '			DELETE	6.1 TITLE				Change	☐ Addition
NAME				6.2 NAME					

6.3 STREET ADORESS

14. I 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, with all other like empowered.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90122 030 \*\*\*150.00