

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2004 8:00 am
Secretary of State

09-03-2004 90005 011 ***150.00

24083490



08302004 Chg-P CR2E034 (10/03)

4. FEI Number **65-0897354** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

O'DONNELL, HUGH J
2201 S E INDIAN ST UNIT C-3
B&A INDUSTRIAL PARK
STUART, FL 34997

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	O'DONNELL, HUGH	
STREET ADDRESS	2201 S E INDIAN ST UNIT C-3	
CITY-ST-ZIP	STUART, FL 34997	
TITLE	ST	<input type="checkbox"/> Delete
NAME	O'DONNELL, LISA	
STREET ADDRESS	2201 S E INDIAN ST UNIT C-3	
CITY-ST-ZIP	STUART, FL 34997	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE:

Hugh J. O'Donnell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-30-04 772 286-9599

Date

Daytime Phone #

ATTACHMENT
24083490

August 26th, 2004

Florida Department of State
Div. of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Jap Auto Masters, Inc.
FEIN#: 65-0897354
Document #: P99000004383

Dear Sir or Madam:

Enclosed you will find my Florida Annual Report for the year 2004, and check for the annual filing fees of \$150.00. This return was not filed in error, as we never received our filing forms. Please abate the additional \$400.00 late filing fee as we had no intention of not filing these annual reports nor did we have any intention of not paying the annual fees. Please file these reports and re-instate my status on both of these corporations. Thank you for your time and attention in this matter.

Sincerely,

+ Hugh O'Donnell, pres.

Hugh O'Donnell