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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S18713

DENNIS' AUTO BODY, INC.

Principal Place of Rusiness

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90061 016 ***158.75



	e di Dusilless	Maining Address					
6945 C SONN	Y DALE DRIVE	6945 C SONNY DA	ALE DRIVE				
WEST MELBOU	JRNE FL	WEST MELBOURN	E FL		DO NOT WRITE IN T	UE EDACE	
					DO NOT WRITE IN THE	115 SPACE	
					3. Date Incorporated or Qualifed		
					12/10/1990		
2. Principal P	Place of Business	2a. Mailing Addre	ess		4. FEI Number		Applied For
21	·	26			59-3114690		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.		5. Certifcate of Status Desired	\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee I	Required
City & Stat	te	City & State		-	6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Co	ountry	8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.	🗍 Yes	X ÍNo
	9. Name and Address of Currer	nt Registered Agent	11		10. Name and Address of New Registers	ed Agent	
	10 10 1 1 1 C			81 Name	**		
TRA	DER, J. RUDI						
903 E STRAWBRIDGE AVENUE				82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
	BOURNE FL 32901			83			1 8 H 2 8 1 1 2 2 2 3 2 3 2 5 2 5 3 2 5 2 5
IVILL	DOURINE I E 32301			83			
	•			84 City		85 Zir	o Code
A COLOR	and the second s				F		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florid	la Statutes, the	above-named co	orporation submits this statement for the purpose	of changing i	ts registered
agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such chang itions of, Section 607.0	je was autnorize 505, Florida Sta	ed by the corpora atutes.	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	politiment as	registered
SIGNATURE	Signature, typed or printed name of registered age						
					DATE:		
			<u>'</u>	,	uired when reinstating) DATE	AND DIRECT	TORS IN 12
12.	OFFICERS AN	ND DIRECTORS	13	3.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	OFFICERS AN		13 LETE 1.11	TITLE		AND DIRECT	
TITLE NAME	PD MCCARTHY, DENNIS M.	ND DIRECTORS	13 LETE 1.11 1.21	TITLE NAME	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD MCCARTHY, DENNIS M. 1804 NE COCO PLUM ST	ND DIRECTORS	13 LETE 1.11 1.21	TITLE	ADDITIONS/CHANGES TO OFFICERS		
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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)(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 Appropriation 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 anyanderss, with all other like empowered.

SIGNATUR