## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT COSPORATION ANNUAL REPORT

· 1996



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

DOCUMENT #

S37438

ERNES	T AUTOMOTIVE, IN	NC.									
Principal Place 1580 S. DeLand,	Woodland Blvd.		woodlan FL 327		vd.	•					
							3. Date incorporated or Qualified 03/13/1991	3a. Date	of Last Repo	ort	
9 Procinal Pla	ace of Business	2a. Mailing	Address				4. FEI Number		Apr	olied For	
a. Pilicipai rie	ace of bosiness	26					59-3055521		Not	Applicable	
·1			e, Apt. #, etc.				5. Certificate of Status Desired	sired S8.75 Additional			
2		27					5. Certificate of Status Desired		Fee Rec	quired	
City & State	A CONTRACTOR OF THE CONTRACTOR	City & State					6. Election Campaign Financing		\$5.00		
3		28					Trust Fund Contribution	<u>!!</u>	Added to		
Zip	Country 25	Zip 29		Coul	ntry		8. This corporation has liability for Florida Statutes Yes	r intangible i No	tax under s	199 032,	
<u></u>	9. Name and Address of Curren			<del></del> 1			10. Name and Address of New I	tegistered	Agent		
<del> </del>					81	Name					
	)., a Florida co:				82	Stropt Ar	ddress (P.O. Box Number is Not Accept	able			
c/o Ma	ahoney Adams & C:	riser,	P.A.	l	اء"	Street At	To box trained to the recopt				
50 N.	Laura Street, 3	400 Bar	nett Ct	r.	63		· · · · · · · · · · · · · · · · · · ·				
Jackso	onville, FL 322	02		ļ	-	0.1.			85 Zip (	Code	
					84	City		FL	<b>-</b>		
office or re agent I ar	o the provisions of Sections 607 050 egistered agent, or both, in the State in familiar with, and accept the obligi	ALFIANIDA SUCI	N ANDANNE WAS A	urnorizei	ายง	me coro	orporation submits this statement for the exation's board of directors. I hereby acc	purpose of the purpos	if changing its pointment as	s registered registered	
SIGNATURE _	Signal are typed or printed name of registered age	ent and title if applicab	le [NOTE	Registere	d Age	ni signature re	equired when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS		13.			ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	D/P DELETE			1 1 1	ΙΓLΕ				[] Change	Addition	
NAME	Ernest, Albert	III		12 N	AME						
STREET ADDRESS	1580 S. Woodlan	d Blvd.		135	TREE1	ADDRESS					
CITY - ST - ZIP	DeLand, FL 327	20				1 - 21P			Change	Add tion	
TITLE	Chm		DELETE	2 1 1		l			[_] Crisinge	Mac tion	
NAME	Ernest, Jr., Al	bert		22 N		Ì					
STREET ADDRESS	1580 S. Woodlan			4		ADDRESS					
CITY - ST - ZIP	DeLand, FL 327	20	NA DELETE			ST - ZIP			Change	Addition	
TITLE	S/T	с т	DELETE	3 1 3		İ			-C3		
NAME	Bottoms, France 1580 S. Woodlan			32 N		T ADDRESS					
STREET ADORESS				1							
CITY - ST - ZIP	DeLand, FL 327	20	DELETE		TITLE	\$1 - ZIP			Change	Addition	
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NAME						T ADDRESS					
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CITY-ST-ZIP TITLE	<del> </del>		DELETE		TITLE				Change	[ ] Addition	
NAME					NAME						
STREET ADDRESS	1			1		T ADDRESS					
						ST-ZIP					
CITY - ST - ZIP			DELETÉ		TITLE		60000185	<u> </u>		Addition	
NAME			-	62	NAME		-06/06/96010	188- <b>-</b> 02	7 5	7	
STREET ADDRESS				63	STALE	T ADDRESS	***200.00		· /	11 12	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 Phanged, or on an attachment with an address.

64 CITY - ST - ZIP

SIGNATURE:

CITY - ST - ZIP

SIGNATURE AND DIFFE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR