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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S47978 1. Corporation Name

SIMONELLI REPAIRS INC.

Principal Place of Business
850 SEMINOLE AVE LONGWOOD FL 32750

Mailing Address

850 SEMINOLE AVE LONGWOOD FL 32750

2a. Mailing Address

FILED Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90034 038 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

04/25/1991

4. FEI Number

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SIMONELLI, TIMOTHY D. 850 SEMINOLE AVE LONGWOOD FL 32750 11. 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 register 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, an familiar with, and accept the obligations of, Section 607.0502, Florida Statutes, see above-named corporation submits this statement for the purpose of changing its registered agent, an familiar with, and accept the obligations of, Section 607.0503, Florida Statutes. SIGNATURE 12.	-	9. Name and Address of Current	Registered Agent			10. Name and Address of New F	Registered /	Agent	
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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 truetee 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.

SIGNATURE