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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation		67	(O)						
ALAN'	S DISCOUNT MUFFLER,	INC.							
Principal Place o	of Business	Maili	ng Address				ii febi aralı alalı		
331-A NE 33RD AVE GAINESVILLE FL 32609-2333 US		(331-A NE 33RD AVE GAINESVILLE FL 32609-2333 US						
US		'	J			3. Date Incorporated or Qualified 05/22/1991	L		
2. Principal Pla	ce of Business	2a. N	Mailing Address			4. FEI Number	4,	<u> </u>	
1		26				59-3107212			
Suite, Apt. #	r, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	
City & State			ity & State			Election Campaign Financing Trust Fund Contribution			
- 1 Zip	Country 25		' ıp	Country		8. This corporation has liability for i			
4	9. Name and Address of Curre		red Agent	1301				ent	
		<u> </u>		81	Name				
MONTA	ANE, ALAN E.			82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
	NE 33RD AVE								
GAINES	SVILLE FL 32601			83					
				84	City		El	85 Zip	Code
11 Persuant to	o the provisions of Sections 607.05	02 and 607.	1508. Florida Statute	Spot AVE First 2009-2333 Spot Spot					
or registers	ed agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such d	change was authorize	ed by the corpo	ration's boa	rd of directors. I hereby accept the appo	ointment as re	gistered a	agent. I am
SIGNATURE	n, and becept the congruent on, co								
	Segnature, typed or printed name of registered age				signatura require			IDCOTO!	20 IN 40
12.	OFFICERS A	AND DIRECT	ORS DELETE			ADDITIONS/CHANGES TO OFF			
TIJLF	PD		beer is				L	o.m.igo	
NAME CIDELL MODDERS	MONTANE, ARIEL 928 SW 51 WAY			- 1	ADORESS				
STREET ADDRESS	GAINESVILLE FL								
CHY-S1- <i>76</i> 1 1 106	STD		DELETE		211			Change	☐ Addition
NAME	MONTANE, ALAN E.		-	2.2 NAME					
STHEL' ADDRESS	331-A NE 33RD AVE			2 3 STREET	ADDRESS				
City ST-ZiP	GAINESVILLE FL			2 4 CITY-S1	- 7 IP				
TITLE			DELETE	3 1 TITLE	[]			Change	☐ Addition
NAME				3.2 NAME	1				
STREET ADDRESS				33 STREFT	ADDRESS				
CITY ST ZIE			CT DC: ETC		I - ZiP			Changa	[7] Addition
TITLE			DELETE				U	OHONGE	L) Nation
t-AME				l l	1000100				
STREET ADDRESS									
C-1Y-S1-ZIP			DELETE		1 · ZIP		П	Change	Addition
TITLE NAME			[] 01111					•	
STREET ADDRESS					ADDRESS				
CHY-SI-ZIP					1				
TIFLE			DELETE		1			Change	Addition
NAME				6.2 NAME					
STREET ADDARESS				6 3 STREET	ADDRESS				
City St Ziff									
14. i do hereb	y certify that the information supplie	ed with this f	ling is voluntarily furn	ished and does	s not qualify	for the exemption stated in Section 119	.07(3)(k), Florid	Ja Statute	es. 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.

SIGNATURE: Clean Mor

Daytime Phone #