FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Apr 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V15813 (1) HANK 'N SON AUTO COLLISION, INC. Principal Place of Business Mailing Address 960 RAILROAD AVE. 960 RAILROAD AVE. WINTER PARK FL 32789 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1992 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 59-3112673 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 \$5.00 May Be City & State City & State 8. Election Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FITZGIBBON, GLENDA K. 960 RAILROAD AVE. 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 83 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE Change Addition TIFLE 1 1 TITLE FITZGIBBON, HENRY J. 12 NAME NAME CR2E034 960 RAILROAD AVENUE 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition DILE NAME MICHAEL CASELLA 22 NAME STREET ADDRESS 980 RAILROAD AVENUE 23 STREET ADDRESS WINTER PARK FL 32789 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FITZGIBBON, GLENDA K. NAME 3.2 NAME 960 RAILROAD AVENUE STREET ADDRESS 3 3 STREET ADDRESS WINTER PARK FL CITY - ST - ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - 7IP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

DELETE

61 TITLE 6.2 NAME

63 STREET ADDRESS

6.4 City-St-ZiP

14. I hereby certify that the information supplied with this filling 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 roport 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 corporate of the roceiver 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 from an attachment with an address.

TiTLE

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

Change

Addition