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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#

V63415

(6)

AUTO	OMATIC GATES INC.				ATAN ANAN CIRIN ANAN ANAN ANAN KARI
Principal Plac	oe of Business	Mailing Address		I HODAN ORREGE OFFICE FIGUR ORGAN RADER DRAF	OLOUT BIGHT BIRHT DIGHT BIRH BIRH (SO)
284 N.E. 42ND ST. POMPANO BEACH FL 33064 US		284 N.E. 42ND ST. POMPANO BEACH FL 33064 US		DO NOT WRITE IN	THIS SPACE
		00		3. Date Incorporated or Qualified	·
				09/11/1992	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3051	NW 28th STREET	26 3051 NW 28	th STREET	65-0357015	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional
22		27		S. Comments of Charles Boom Co	Fee Required
City & Stai		City & State		6. Election Campaign Financing	\$5.00 May Be
	ERDALE LAKES, FL	28 LAUDERDALE		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	B. This corporation owes or has paid t	
24 333			30 USA	Personal Property Tax due June 30.	
	9, Name and Address of Curren	i Hegistered Agent	81 Name	10. Name and Address of New Regis	tered Agent
SCOTT, MARVIN L 284 NE 42 STREET POMPANO BEACJ FL 33084			of Marile		
			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
					FL S Zip Cook
11, Pursuant	to the provisions of Sections 607.0500 registered agent, or both, in the State.	2 and 607.1508, Florida Statute of Florida, Such change was a	s, the above-named corp	poration submits this statement for the purp ion's board of directors. I hereby accept the	ose of changing its registered
agent. I a	am familiar with, and accept the obliga	itions of, Section 607.0505, Flor	ida Statutes.	ion's board of directors. Thereby accept in	c appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered agei		Registered Agent signature requir		DATE
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	SCOTT, MARVIN L		1.2 NAME		;
STREET ADDRESS	284 NE 42ND STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	VP	DELETE	2.1 TITLE		Change Addition
NAME	SCOTT, SHERRY E.		2.2 NAME	·	
STREET ADDRESS	284 NE 42 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+S1-ZIP		···	3.4. 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 - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET AODRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 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.

FILED

Mar 25 1998 8:00am

Secretary of State