

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000068262

**Entity Name:** LEX'S AUTOMOTIVE & 4 WHEEL DRIVE REPAIR, INC.

**Current Principal Place of Business:**

1045 HASKO ROAD  
PALMETTO, FL 34221

**Current Mailing Address:**

1045 HASKO ROAD  
PALMETTO, FL 34221

**FEI Number:** 65-0608101

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEX, TANYA  
1045 HASKO ROAD  
PALMETTO, FL 34221 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LEX, EDWARD A.  
Address 1045 HASKO ROAD  
City-State-Zip: PALMETTO FL 34221

Title VP  
Name LEX, TANYA .  
Address 1045 HASKO ROAD  
City-State-Zip: PALMETTO FL 34221

Title S  
Name LEX, TANYA .  
Address 3906 89 ST E  
City-State-Zip: PALMETTO FL 34221

Title VS  
Name LEX, EDWARD A.  
Address 3906 89 ST E  
City-State-Zip: PALMETTO FL 34221

Title T  
Name LEX, TANYA S.  
Address 3906 89 ST E  
City-State-Zip: PALMETTO FL 34221

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TANYA LEX

VP

01/22/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date