Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90022 036 \*\*\*150.00

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION'OF CORPORATIONS

## DOCUMENT # 398931

1. Corporation Name

DEERFIELD SUZUKI, INC.

OLLIN IL	.ED 002010, 1110	•								
Principal Place	e of Business	Mailing A	ddress					/ E1811 W	1911 9181	71 <b>618</b> 11 1461
4141 NORTH FEDERAL HIGHWAY 4141 NORTH FEDERAL HIGH POMPANO BEACH FL 33064 4141 NORTH FEDERAL HIGH POMPANO BEACH FL 33064 4141 NORTH FEDERAL HIGH							·			
							DO NOT WRITE IN THIS SI	PACE		
	•						3. Date Incorporated or Qualifed			-
							04/10/1972			
<ol><li>Principal P</li></ol>	lace of Business	2a. Mailin	g Address				4. FEI Number	$\vdash$		ied For
21		26					59-1537048	<u>¢0 -</u>		Applicable
Suite, Apt.	#, etc.`	— — ·	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
22	<u> </u>	27	C4-1-				The state of the s			
City & Stat		∵ -∠ <del> </del> ,=å.=+	State		س		6. Election Campaign Financing		. <b>00</b> м ded to	
23	Country	28     Zip	<del></del>	Cou	ntn/		This corporation owes the current year Intan		200 10	1000
Zip	Country	— ·		30	ii ici y			∏ Yes	1	ZNo
24	9. Name and Address of Curr	29	\	30	_		10. Name and Address of New Registered Ag	gent		
	9. Name and Address of Odis	one registered r			81	Name				
BAR	SKIS III., PETER A.						(D.O. D. Al. havin blad & accordable)			
128 S.E. 11TH COURT					82	Street Add	ress (P.O. Box Number is Not Acceptable)			}
DEE	RFIELD BEACH FL 33441				83					
								<del></del>		
					84	City	FL	85	Zip Co	ade
agent, I a	m familiar with, and accept the obli	gations of, Section	n 607.0505, FIO	rida Stati	utes	·. -	on's board of directors. I hereby accept the appointred when reinstating)			
12.		AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND			RS IN 12 Addition
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NAME	BARSKIS, KATHLEEN S.			1.2 N						1
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NAME	BARSKIS, PETER A III			2.2 N/						1
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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 one as attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP