

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

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**


FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # G74812**

1. Corporation Name  
**AFFORDABLE AUTO SALES, INC.**

## Principal Place of Business

2500 HOLLYWOOD BLVD.  
STE 212  
HOLLYWOOD FL 33020

## Mailing Address

2500 HOLLYWOOD BLVD.  
STE 212  
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

## 3. Date Incorporated or Qualified

11/03/1983

4. FEI Number  
**59-2477833**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐-\$8.75-Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes ☐ No

## 2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

24 Zip Country

## 2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

29 Zip Country

## 9. Name and Address of Current Registered Agent

**JOESPH P KLAPHOLZ ESQ**  
2500 HOLLYWOOD BLVD.  
STE 212  
HOLLYWOOD FL 33020

## 10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 807.0502 and 807.1508, 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 807.0505, Florida Statutes.

## SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE **PSDT** ☐ DELETE  
NAME **NEADEL, ROBERT**  
STREET ADDRESS **1925 PEMBROKE ROAD**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT NEADEL

**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90100 029 \*\*\*150.00



CR2E034 (11/98)

954-920-2233