

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

REINSTATEMENT

FILED

98 MAR 13 AM 8:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H 52142  
1. Corporation Name  
A INTERNATIONAL DRIVING SCHOOL, INC.

Principal Place of Business Mailing Address  
7216 S.W. 8th Street Suite 1  
MIAMI, FLORIDA 33144

REINSTATEMENT

94-98

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
22 Suite, Apt #, etc. 27 Suite, Apt #, etc.  
23 City & State 28 City & State  
24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 04/11/85  
4. FEI Number 59 2637030 Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
VICTOR HUGO MONTALVO  
7216 S.W. 8th Street suite 1  
Miami, Florida 33144

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 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]* VICTOR H. MONTALVO 03-05-98  
DATE

12. OFFICERS AND DIRECTORS

TITLE P	VICTOR HUGO MONTALVO <input type="checkbox"/> DELETE
NAME	705Q SW 156 Ct.
STREET ADDRESS	Miami, Fl. 33193
CITY-ST-ZIP	
TITLE S	BEATRIZ MONTALVO <input type="checkbox"/> DELETE
NAME	7050 SW 156 Ct.
STREET ADDRESS	Miami, Fl. 33193
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	900002459019--3
2.1 TITLE	-03/17/98--01007--011 Addition
2.2 NAME	***1358.75 ***1358.75
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* VICTOR H. MONTALVO 03/05/98 305 261 1335  
Date Day:me Phone #

CR2E034 (10/97)