FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # K42956

(8)

BERLINER CLASSIC MOTORCARS, INC. Principal Place of Business Mailing Address 1975 STIRLING ROAD DANIA FL 33004 DANIA FL 33004								
					3. Date Incorporated or Qualified	3a. Date of		-
					11/02/1988	04	/11/19	<i>1</i> 95
	ace of Business	2a. Mairing Address			4. FEI Number		-	Applied For
		26	L		65-0088359			lot Applicable
Suite, Apt.	#, etc.	₁	Suite, Apt. #, etc.		5. Certificate of Status Desired		,	Additional
2		27						equired
City & State			City & State		Election Campaign Financing Trust Fund Contribution			May Be I to Fees
Zip Country			Zip Country		This corporation has liability for	intencible tax :		
4]	25	29	30	y		Intangicie tax t	illue: 5	159.032,
*1	9. Name and Address of Curre		1901		10. Name and Address of New R		ent	
			81	Name				
Warren L. Berliner			82	Street Addr	ress (P.O. Box Number is Not Acceptab	ole!		
	STIRLING ROAD		02	Street Addi	1855 (F.O. BOX HUMBER IS NOT ACCEPTAGE	10)		
	33004		83					
			84	City			85 Zip	Code
			"	,		FL	55 2.4	ocac
12.		DELETE	13.	sil Sejual-Zé toquee	ADDITIONS/CHANGES TO OFF		IRECTO	RS IN 12
TITL E	PD Berliner, Warren L.		1 1 7 17 LF			LJ.	Stratige	MUUITOIT
NAME Street address	1975 STIRLING ROAD		1.2 NAM:	I ADDD(O)				
	DANIA FL			T AODRESS				
CITY+S1+ZIP TITLE	STD	☐ DELETE	1.4 C-TY - 2.1 TiTLE				Change	☐ Addition
NAME	BERLINER, PAULA		2.2 NAME	•			5.15.190	
STREET ADDRESS	1975 STIRLING ROAD			T ADDRESS				
CITY-ST-ZIP	DANIA FL		2331MLC					
TITLE	WINTER		2Afilty.					
NAME		DELETE	2 4 CITY - 3 1 TIFLE	ST - 7:P			Change	☐ Addition
STREET ADDRESS		☐ DELETE		ST-7/P			Change	☐ Addition
		☐ DELETE	3 1 TIFLE 3 2 NAME	ST-7/P			Сһалде	Addition
CITY - ST- ZIP		☐ DELE1E	3 1 TIFLE 32 NAME 33 STREE	ST-ZIP ET ADDRESS	,		Change	☐ Addition
		DELETE	3 1 TIFLE 3 2 NAME	ST-ZIP ET ADDRESS ST-ZIP			Change Change	Addition Addition
TITLE			3 1 TIFLE 32 NAME 33 STREE 34 CITY -	ST-Z/P ET ADDRESS ST-Z/P				
TITLE NAME			3 1 TIFLE 32 NAME 33 STREI 34 CITY - 4 1 TITLE 42 NAME	ST-Z/P ET ADDRESS ST-Z/P				
ITLE IAME STREET ADDRESS			3 1 TIFLE 32 NAME 33 STREI 34 CITY - 4 1 TITLE 42 NAME	ST-ZIP ET ADDRESS ST-ZIP T ADDRESS				
ITLE IAME STREET ADDRESS CITY-ST-ZIP			3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE	ST-ZP ET ADDRESS ST-ZIP T ADDRESS ST-ZIP				
ITLE HAME STREET ADDRESS CITY - ST - ZIF		☐ D€: ETE	3 1 TITUE 32 NAME 33 STREE 34 CITYE 4 1 TITUE 42 NAME 43 STREE 44 CITYE	ST-ZP ET ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS			Change	Addition
ITLE NAME STREET ADDRESS CITY - ST - ZIP TILE NAME		☐ D€: ETE	3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME	ST-ZP ET ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS			Change	Addition
ITLE IAME STREET ADDRESS OTY - ST - ZIP ITLE NAME STREET ADDRESS		☐ D€: ETE	3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME	ST-ZP ET ADDRESS ST-ZIP I ADDRESS ST-ZIP T ADDRESS			Change	Addition
ITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP		☐ D€: ETE	3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME 53 STREE	ST-ZP ET ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP			Change	Addition
ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STREE 44 CITY- 5 1 TITLE 52 NAME 53 STREE 54 CITY-	ST-ZP ET ADDRESS ST-ZIP I ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP			Change Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS		☐ DELETE	3 1 TITLE 32 NAME 33 STREE 34 CITY- 4 1 TITLE 42 NAME 43 STHEE 52 NAME 53 STREE 54 CITY- 6 1 TITLE 52 NAME	ST-ZP ET ADDRESS ST-ZIP I ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP			Change Change	Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath, that I am an officer or director if the corporated visit reviewer or trustee entrewwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 1250 Block 13 if changed, or on an affective with an affective.

SIGNATURE:

Warren L. Berliner, President 4/19/96 954-923-7271 D NAME OF SIGNING OFFICER OR DIRECTOR