FILED

Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90063 007 ***150.00

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

Corporation)			
RILL SEI	DLE SUZUKI, INC.				
Principal Place	e of Business	Mailing Address		1 (2010)!! 211 0120! 19121 01121 01121	25 \$16 \$16 \$16 \$16 \$16 \$16 \$16
2900 NW 36TH	ST.	2900 NM, 26TH ST.			
MIAMI FL 33142		MIAMI FL 33142		DO NOT WEIT	C IN THIS SPACE
US		US		3. Date incorporated or Qualifed	E IN THIS SPACE
	· · · · · · · · · · · · · · · · · · ·	O Marie Address		12/01/1988 4. FEI Number	Applied For
	ace of Business	2a. Mailing Address		65-0092847	Not Applicable
21 Suito Ant	ш	Suite, Apt. #, etc.			\$8.75 Additional
Suite, Apt.	~ 1 ×1 C 1	27 Suite, Apr. #, etc.		5. Certifcate of Status Desired	Fee Required
22) 11 12 Y City & State		City & State		6. Election Campaign Financing	\$5.00 May Ro
23	,	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the curre	
24	25	⊢	30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curre			10. Name and Address of New R	egistered Agent
			81 Name		
	PLE, MICHAEL A		82 Street Addi	ress (P.O. Box Number is Not Accepta	hle)
	NW 36TH ST		02 0110011101	Toda (F.O. Don Humber to Harris -	
MIAM	MI FL 33142		83		
			1 1		
			94 City		85 Zip Code
			84 City		FL 85 Zip Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obliga	e of Florida. Such change was aut ations of, Section 607.0505, Flori	s, the above-named corp thorized by the corporation da Statutes.	poration submits this statement for the ion's board of directors. I hereby accep	purpose of changing its registered the appointment as registered
office or re agent. I as	egistered agent, or both, in the State in familiar with, and accept the obligations of the obligation	a of Florida. Such change was autiliations of, Section 607.0505, Floridations of the interest and title if applicable. (NOTE: F	s, the above-named corporation the corporation of t	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered
office or reagent. I as SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age OFFICERS AF	ent and title if applicable. (NOTE: F ND DIRECTORS	s, the above-named corporation that the corporation da Statutes. Registered Agent signature requires 13.	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE ICERS AND DIRECTORS IN 12
office or reagent. I as	egistered agent, or both, in the State m familiar with, and accept the obligation Stgnature, typed or printed name of registered age OFFICERS AF	a of Florida. Such change was autiliations of, Section 607.0505, Floridations of the interest and title if applicable. (NOTE: F	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered
office or reagent. I as SIGNATURE 12. TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligation Signature, typed or printed name of registered age OFFICERS AF DP SEIDLE, BILL	ent and title if applicable. (NOTE: F ND DIRECTORS	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE ICERS AND DIRECTORS IN 12
office or reagent. I as	egistered agent, or both, in the State m familiar with, and accept the obligation of	ent and title if applicable. (NOTE: F ND DIRECTORS	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE ICERS AND DIRECTORS IN 12
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of	ent and title if applicable. (NOTE: F DDIRECTORS DELETE	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE CHANGE AND DIRECTORS IN 12 Change Addition
office or in agent. I as SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligation of	ent and title if applicable. (NOTE: F ND DIRECTORS	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE ICERS AND DIRECTORS IN 12
office or ragent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligation of	ent and title if applicable. (NOTE: F DDIRECTORS DELETE	s, the above-named corporation of the corporation o	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE CHANGE AND DIRECTORS IN 12 Change Addition
office or r agent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of the state o	ent and title if applicable. (NOTE: F DDIRECTORS DELETE	s, the above-named correction/ized by the corporation of Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	on s board of directors. I neteby accepted when reinstating)	purpose of changing its registered the appointment as registered DATE CHANGE AND DIRECTORS IN 12 Change Addition
office or riagent. I ai agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of the state o	ent of Florida. Such change was autations of, Section 607,0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE	s, the above-named correction/ized by the corporation da Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or riagent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligation of the state o	ent and title if applicable. (NOTE: F DDIRECTORS DELETE	s, the above-named correctionized by the corporation da Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE CHANGE AND DIRECTORS IN 12 Change Addition
office or riagent. I ai agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of t	ent of Florida. Such change was autations of, Section 607,0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE	s, the above-named correctionized by the corporation da Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or riagent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	ent of Florida. Such change was autations of, Section 607,0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE	s, the above-named corporation of the corporation o	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or riagent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of t	en of Florida. Such change was autiliations of, Section 607.0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named corporation of the corporation o	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or ri agent. I ar agent. I ar agent. I ar agent. I ar signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	ent of Florida. Such change was autations of, Section 607,0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or riagent. I are signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	en of Florida. Such change was autiliations of, Section 607.0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named corporation of the corporation o	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I ai agent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	en of Florida. Such change was autiliations of, Section 607.0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or ri agent. I ar agent	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	a of Florida. Such change was autiations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of applicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I ai agent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	en of Florida. Such change was autiliations of, Section 607.0505, Floridations of the physicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE 5.1 TITLE	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I ai agent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	a of Florida. Such change was autiations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of applicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I ai agent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	a of Florida. Such change was autiations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of applicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or in agent. I ai agent. I ai agent. I ai signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	a of Florida. Such change was autiations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of applicable. (NOTE: FND DIRECTORS DELETE DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE DATE Change
office or ragent. I ai agent. I ai agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligation of familiar with a second of familiar with a secon	a of Florida. Such change was autiations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of applicable. (NOTE: FND DIRECTORS DELETE DELETE	s, the above-named correctionized by the corporation da Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	on's board of directors. I neverly accepted when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

705-673-8000