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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

POCUMENT # P94000049283 (2)

MOTORCAR ENTERPRISES INC.

Mailing Address Principal Place of Business 12474 SW 128TH ST 12474 SW 128TH ST MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1994 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0583435 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 26 23 Country 8. This corporation owes or has paid the current year Intangible Zip Country Zip Yes 30 Personal Property Tax due June 30. 25 29 24 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name RODRIGUEZ, JORGE CPA 7721 SW 62 AVE, SUITE 201 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 224 83 **MIAMI FL 33143** 84 Zip Code City 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 (NOTE Registered Agent a-greature required when re-instating) Signature, typed or pented name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 11 TITLE TITLE NAME **ESTEVE. ERNESTO** 12 NAME 14080 SW 152 PLACE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CHY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELFTE 21 TITLE TITLE **VD** CASTANEDA, EDDY 2.2 NAME 9214 SW 214TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - 7IP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- 7IP Addition ☐ Change DELETE 6.1 TITLE THLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY - ST - ZIP 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 attactiment with an address.