

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

97 NOV 10 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000065349 (0)

1. Corporation Name
ANDREW AUTO SALES OF MIAMI, CORP.



Principal Place of Business: 2990 NW 22 ST MIAMI FL 33142 US
Mailing Address: 2990 NW 22 ST MIAMI FL 33142-7002 US

3. Date Incorporated or Qualified: 08/31/1994
3a. Date of Last Report: 08/09/1996

2. Principal Place of Business: 21 Suite, Apt. #, etc.

2a. Mailing Address: 26 Suite, Apt. #, etc.

4. FEI Number: 65-0518822
Applied For: Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24 Zip 25 Country 29 Zip 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Perez, OSVALDO
1225 W 35 ST #63-A
HIALEAH FL 33012

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PV8K	1.1 TITLE	
NAME	PEREZ, OSVALDO	1.2 NAME	
STREET ADDRESS	1225 W 35 ST #63-A	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33012	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	Director, Secretary & Treasurer
NAME		2.2 NAME	Perez, Andres
STREET ADDRESS		2.3 STREET ADDRESS	2323 SW 36 ave
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami FL 33145
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	200002345232
NAME		4.2 NAME	-11/12/97-01103-019
STREET ADDRESS		4.3 STREET ADDRESS	****558.75 ****558.75
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: _____ DATE: 9-15-97 2016364301

CR2E034 (9/96)