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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

96/6)

CR2E034

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000037110 (0)

S AND R AUTOMOTIVE, INC.

Principal Place of Business Mailing Address 7934 SW 5TH STREET 5415 NW 15TH STREET NORTH LAUDERDALE FL 33068-1115 **BAY 17** MARGATE FL 33063 3. Date Incorporated or Qualified 3a. Date of Last Report 05/08/1995 05/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0585196 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zφ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🛮 🗶 No Yes 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 CERVANTES, SEBASTIAN 5415 NW 8TH STRET Street Address (P.O. Box Number is Not Acceptable) **BAY 17** MARGATE FL 33063 83 84 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 fam har with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title diapplicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition THILE 1.1 TITLE CERVANTES, SEBASTIAN NAME 1.2 NAME 7934 S.W. 5TH STREET 1.3 STREET ADDRESS STREET ADDRESS NORTH LAUDERDALE FL 33068 1.4 CITY-ST-ZIP DITY - ST - ZIP Change vsdt DELETE Addition TITLE 2.1 T(T) F QUICENO, RUBEN NAME 2.2 NAME 1700 SW 69TH AVE. STREET ADDRESS 2.3 STREET ADORESS **NORTH LAUDERDALE FL 33068** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change ☐ Addition 31 TITLE TITLE NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS 34. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - \$1 - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY - ST - ZIP DELETE ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certily 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 frue 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