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

DOCUMENT # V74138

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M. & M. AUTOMOTIVE OF NORTH MIAMI, INC.

Principal Piace of Business Mailing Address 13015 NE 14TH AVENUE 13015 NE 14TH AVENUE N MIAMI FL 33161 N MIAMI FL 33161-4414 3. Date incorporated or Qualified 3a. Date of Last Report 10/22/1992 04/23/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0368550 21 26 Not Applicable Suite, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KHATAMI, MAJID 13015 N E 14 AVE Street Address (P.O. Box Number is Not Acceptable) 82 N. MIAMI FL 33161 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Segmentive, typest or printed name of registered agent and tice if applicable (NO18: Registered Agent signature required when reinstating) (96/6) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change Addition THILE 1.1 TITLE KHATAMI, MAJID R2E034 1.2 NAME NUMB 7421 GARFIELD ST STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 1 4 CITY - ST - ZIP $C(\{17\cdot S1\cdot 7\}^p)$ DELETE Change Addition THE 21 TITLE NAME 2 2 NAME 2.3 STREET ADDRESS STREET ADORESS 2.4 CITY-ST-ZIP CHY-SI DELETE ☐ Change Addition 3.1 TITLE TITLE

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 inclicated 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 regeiver 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 attachment with an address

3.2 NAME

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MAJID KHATAMI PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 22 1997 8:00am

Secretary of State

Daytime Phone #

Change

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Addition

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