


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

FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000041108 (0)					
1. Corporation Name MERCEDE I-95 SHOWROOM, CORP.					
Principal Place of Business 4200 N.W. 16TH ST. PENTHOUSE A LAUDERHILL FL 33317			Mailing Address 4200 N.W. 16TH ST. PENTHOUSE A LAUDERHILL FL 33317		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/03/1993	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0433359	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BRAUSER, STEVEN 4200 N.W. 16TH ST. SUITE 300 LAUDERHILL FL 33313				10. Name and Address of New Registered Agent	
				81 Name Jeffrey Licker	
				82 Street Address (P.O. Box Number is Not Acceptable) 4200 N.W. 16th St Penthouse A	
				83	
				84 City Lauderhill	85 Zip Code 33313
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 <u>Jeffrey Licker R.A. V.P.</u> 3/12/98 Signature, typed or printed name of registered agent and title if applicable (Typed or printed name of registered agent required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	P10	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRAUSER, STEVEN		1.2 NAME	Beirne Brauser	
STREET ADDRESS	4200 N.W. 16TH ST.		1.3 STREET ADDRESS	4200 NW 16th St Penthouse A	
CITY-ST-ZIP	LAUDERHILL FL		1.4 CITY-ST-ZIP	Lauderhill FL 33313	
TITLE		<input type="checkbox"/> DELETE	2.1 TITLE	Treasurer/Director/Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			2.2 NAME	Renee Zonenshine	
STREET ADDRESS			2.3 STREET ADDRESS	4200 NW 16th St Penthouse A	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Lauderhill FL 33313	
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE	Executive V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			3.2 NAME	Jeffrey Licker	
STREET ADDRESS			3.3 STREET ADDRESS	4200 N.W. 16th St Penthouse A	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Lauderhill FL 33313	
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			4.2 NAME	Robert Minunno	
STREET ADDRESS			4.3 STREET ADDRESS	4200 NW 16th St Penthouse A	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Lauderhill FL 33313	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

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83	
84 City Lauderhill	85 Zip Code 33313

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.

SIGNATURE: Renee Zonenshine 3/12/98 954-730-2108

CR2034 (10/97)