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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # F84669

B & L MOTORS OF DANIA, INC.

Mailing Address Principal Flace of Business % FRANK LOPES % FRANK LOPES 324 SW 4TH COURT 324 SW 4TH COURT DANIA FL 33004 DO NOT WRITE IN THIS SPACE DANIA FL 33004 3. Date Incorporated or Qualifed 06/03/1982 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-2211996 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & E tate City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Zip Country This corporation owes the current year Intangible Zip ΧĺΝο 30 Personal Property Tax 24 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LOPES, FRANK Street Arldress (P.O. Bo) Number is Not Acceptable) 324 SW 4TH COURT DANIA FL 33004 83 84 City 85 Zip Code 11. Pursuant to the provisions of Scictions 607.0502 and 607.1508, Florida Statutes, the above-named of poration submits this statement for the purpose of changing its 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 Signature, typed or printed name of registered agent and title if applicable (NOT E: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ Change ☐ Addition PD DELETE 1.1 TITLE TITLE LOPES, FRANK 1.2 NAME 703 NW 9TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS DANIA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE LOPES, JOYCE 2.2 NAME NAME 703 NW 9TH AVENUE 2.3 STREET ADDRESS STREET ADDRE 35 DANIA FL 2. 4 CITY- ST- ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further curtify that the information indicate 1 on this annual report or suppliemental 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 attachinent with an address, with all other like empowered.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Joyce Lopes SIGNATULE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

DELETE

DELETE

Change

☐ Change

Change

☐ Addition

☐ Addition

☐ Addition

CR2E034 (11/98