**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90099 037 \*\*\*150.00

1. Corporation	MENT # V38184 D AUTO CENTER INC.	<b>,</b>			
Principal Place	e of Business	Mailing Address			in Bibil Bibir Bibir Bibir bibir bibir cabr
2120 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306		2120 E. OAKLAND PARK BL FT. LAUDERDALE FL 333)6	VD.	DO NOT WRITE IN TH	IS SPACE
				3. Date I reprovated or Qualifed 05/21/1992	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0335873	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City. & . State		6. Election Campaign Financing Trust Fund Contribution	\$5.00_/Aay.Be Added to Fees
Zip	Country	Zip 29	Country 30	<ol> <li>This corporation owes the current year Persor al Property Tax.</li> </ol>	Intangible ☐ Yes ☐ No
24	9. Name and Address of Curre	121 +	-	10. Name and Address of New Register	ed Agent
	5. Nume and Address of Gard	regional rigarit	81 Name		
ZIVAN, JACOB 2120 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306					
			82 Street Acd	Iress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	F	85 Zip Code
office or r	egistered agent, or bo h, in the State m familiar with, and accept the obligi	e of Florida. Such change was au ations of, Section 607.0505, Flori	thorized by the corporation of the statutes.	poration submits this statement for the purpose ion's board of cirectors. I hereby accept the ap	pointinent as seg stered
	Signature, typed or printed na ne of registered age	ent and title if applicable (NO11::  NE) DIRECTORS	Registered Agent signature require	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD OFFICERS AI	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO CATAGERO	Change Addition
	ZIVAN, JACOB		1.2 NAME		
NAME	2120 E. OAKLAND PARK BLV		1.3 STREET ADDRESS		
STREET ADDRE :S	FT. LAUDERDALE FL		14 CITY-ST-ZIP		
CITY-ST-ZIP	TD	□ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ZIVAN, BRURYA	_	2.2 NAME		
STREET ADDRESS	2120 E. OAKLAND PARK BLV		2.3 STREET ADDRESS		
	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP		
CITY-ST-ZIP	11. DAODERDALE 11	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
			3.3 STREET ADDRESS		
STREET ADDRES S			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			52 NAME		
DYDEST LODGE C			5.3 STREET ADDRESS		

CITY-ST-ZIP 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 or rifly that the information indicated on this annual report or supplemental a neural 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 a secure 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 effectment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRES 9

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR BUINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ Change

☐ Addition