

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 193775

FILED
Jan 06, 2009
Secretary of State

Entity Name: SOUTH MOTOR COMPANY OF DADE COUNTY

Current Principal Place of Business:

16165 S DIXIE HWY
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

16165 S DIXIE HWY
MIAMI, FL 33157

New Mailing Address:

FEI Number: 59-0788556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMACHO, CESAR
240 E FLAGLER ST
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DASCAL, CHARLES,
Address: 1801 SW FIRST STREET
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: HOFFMAN, LARRY J,
Address: 1221 BRICKELL AVE
City-St-Zip: MIAMI, FL

Title: AS () Delete
Name: HILTON, JOHN
Address: 16165 S. DIXIE HWY
City-St-Zip: MIAMI, FL

Title: PCD () Delete
Name: VILLAMANAN, MANUEL
Address: 16165 S. DIXIE HWY
City-St-Zip: MIAMI, FL

Title: VP () Delete
Name: CHARIFF, JONATHAN
Address: 16165 S DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: LUJAN, RICARDO
Address: 16165 S DIXIE HWY
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: DASCAL, CHARLES
Address: 1801 SW FIRST STREET
City-St-Zip: MIAMI, FL

Title: SD (X) Change () Addition
Name: HOFFMAN, LARRY J
Address: 1221 BRICKELL AVE
City-St-Zip: MIAMI, FL

Title: AS (X) Change () Addition
Name: HILTON, JOHN
Address: 16165 S. DIXIE HWY
City-St-Zip: MIAMI, FL 33157

Title: PCD (X) Change () Addition
Name: VILLAMANAN, MANUEL
Address: 16165 S. DIXIE HWY
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A HILTON

CFO

01/06/2009

Electronic Signature of Signing Officer or Director

Date