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

FILED FLORIDA DEPARTMENT OF STATE Jan 22 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)360430 CHERETIS AUTO SERVICE INC Principal Place of Business Mailing Address 337 71 ST ST 337 71ST ST MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/03/1970 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1278224 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Yes Yes ☐ No 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CHERETIS, JOHN 701 DIPLOMAT PARK WAY Street Address (P.O. Box Number is Not Acceptable) HALLANDALE FL 33009 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE TITLE Change Addition NAME CHERETIS, MARY 1.2 NAME 701 DIPLOMAT PKWY STREET ADDRESS 1,3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP VD DELETE Change Addition TITLE 2.1 TITLE CHERETIS, JENNY NAME 2.2 NAME 21075 NE 34TH AVE, #406 2.3 STREET ADDRESS STREET ADDRESS NO MIAMI BCH, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE CHERETIS, JOHN NAME 3.2 NAME 701 DIPLOMAT PKWY STREET ADDRESS 3.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE CHERETIS, MARY NAME 4. 2 NAME 701 DIPLOMAT PKWY STREET ADDRESS 4.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 13 if changed, or an attack then the true that the information is the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or an attack then the true that the information is the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or an attack then the true that the information is the exemption stated in the exemption of the receiver of the corporation of the receiver of the r

SIGNATURE: