COF ANNU	ILE NOW: FILING FEE PROFIT RPORATION JAL REPORT 1997	FLORIDA DEPA Sandra I Secreta	\$550.00 RIMENT OF STATE B. Mortham ary of State CORPORATIONS	Apr 18	FILED 1997 8:00ar tary of State
EAST C	MENT # 425391 OAST AUTOMOTIVE INDUS THE OF BUSINESS EWS AVE. ACH FL \$3069		)69-4688		
				3. Date Incorporated or Qualified 05/08/1973	3a, Date of Last Report 03/13/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt.	#, elc.	26 Suite, Apt. #, etc.		59-1565123	Not Applicable
City & State	<b>A</b>	27 City & State		5. Certificate of Status Desired	Fee Required
	U	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	<ul> <li>B. This corporation has liability to Florida Statutes</li> </ul>	r intangible tax under s. 199.032,
	9. Name and Address of Curren			10. Name and Address of New R	
	EY, ISRAEL		81 Name	······	
	0 S OCEAN BLVD 905S		82 Street Ac	dress (P.O. Box Number is Not Accepte	able)
	A RATON FL 33432		83		
			84 City		FL 85 Zip Code
		e of Florida. Such change was	authorized by the corpo	propriation submits this statement for the ation's board of directors. I hereby accurate	opt the appointment as registered
SIGNATURE	Signature, typicd or printed name of registered age	ent and title if applicable. (NO	authorized by the corpo- lorida Statutos. It: Registered Agent signature re-	ation's board of directors. I hereby accuration when reinstating)	opt the appointment as registered
SIGNATURE	Signature, typicd or printed name of registered age		authorized by the corpo- lorida Statutes.	ation's board of directors. I hereby acc	opt the appointment as registered
SIGNATURE 12. 11TLE IAME	Signature, typed or printed name of registered age OFFICERS AN PDT LEVEY, ISRAEL	ent and title if applicable. (NO D DIRECTORS	authorized by the corpo- lorida Statutos. It Registered Agent signature re- <b>13.</b> 1.1 TILE 1.2 NAME	ation's board of directors. I hereby accuration when reinstating)	DATE
SIGNATURE 12. 111Le VAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PDT LEVEY, ISRAEL 1500 S OCEAN BLVD 905S	ent and title if applicable. (NO D DIRECTORS	authorized by the corpo- lorida Statutos. It Repistered Agent signature re- <b>13.</b> 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS	ation's board of directors. I hereby accuration when reinstating)	DATE
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