## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

f	1996		tary of State FOORPORATIONS		
DOCUI	MENT # 43279	97 (9)			
Н. D.	AUTO SALES, INC.				
,,,,	7,010 0/100, 17(0)			I I <b>ndi</b> el <b>diana</b> laija jigis kanja a	ANU 1801 BION OLDIN GIBIN DIBIN DIBIN DIBIN DIBIN DIBIN
<u> </u>	4.4		Na		
Principal Place		Mailing Address			ann naar Brant Brait Albit Albit Bigit Atbli Atbli
1309 N. FEDERAL HWY. HOLLYWOOD FL 33020		1309 N. FEDERAL H HOLLYWOOD FL 330			
1102211100	70 TE 00020	HOLLINGOD PL 33L	120		
				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		08/16/1973 4. FEI Number	04/11/1995 Applied For
21		26		59-1497938	Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zιp	Country	Zip	Country	This corporation has liability for	Added to Fees Intanoible tax under s. 199.032
24	[25]	29	30	Florida Statutes Yos	: □No
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New F	Registered Agent
N IBDA	)FSKY, LEONARD			DUBROFSCH	LEONARD
	W. 78 WAY		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
PLANTATION FL 33324			83	6500 E TROI	PICA WAY
				PLANTATION	33317
			84 City		85 Zip Code
<ol> <li>Pursuant to or registere</li> </ol>	o the provisions of Sections 607,0502 ad agent, or both, in the State of Flori	2 and 607,1508, Florida Statute	s, the above named corpor	ration submits this statement for the pur rd of directors. I hereby accept the app	pose of changing its registered office
familiar witt	h, and accept the obligations of, Sect	tion 607.0505, Florida Statutes.		re or directors. Thereby accept the app	ointment as registered agent. I am
SIGNATURE _	Signature, typed or printed han ic of registered agent	tard title happlicable (NO)	TE: Registered Agent signature remive	diskoning and analysis	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1 1 TOTLE	1000	Change Addition
NAME	DUBROFSKY, LEONARD		1.2 NAME		
STREET ADDRESS	1309 N. FEDERAL HWY		13 STREET ADDRESS		
CITY-ST-7/P TITLE	HOLLYWOOD FL SD	Fabrica	1.4 C TY - ST - ZIP		
NAME	Dubrofsky, Lynne	[]] DELEJE	2 1 TITLE		Change Addition
STREET ADDRESS	1309 N. FEDERAL HWY.		2.2 NAME		
CHY-ST-ZIP	HOLLYWOOD FL		2.3 STREET ADDRESS 2.4 CHTY - ST - ZIP		
TITLE		DELETE	3 1 1 IILE		Change
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-S1-7(P			3.4 CHY-\$1-2IP		
TITLE		DELETE	4. 1 TITLE		Change Addition
NAME STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TILE		[] DELETE	5 1 TITLE		
NAME		bad - backing	5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS	800000180	Jagea
CITY-ST-ZIP			5.4 C(1) Y - \$1 - 7(P	90000180 95/02/96010	02006
TOTLE		DELETE	6. 1 TO LE	***200,00	Change Addition
NAME			6.2 NAME		·
STREET ADDRESS			6.3 STHEFT ADDRESS		5-1-96
14. I do hereby	certify that the information summed v	vith this filing is valuated to the	6.4 CRY-SI-ZP	or the exemption stated in Section 119,0	- OR
certify that t	he information indicated on this annu	al report or supplemental annua	al report is true and accurat	or the exemption stated in Section 119.0 te and that my signature shall have the s	가(강)(K), Florida Statutes. I further 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 go an attacoment with an address.

SIGNATURE:

SIGN ONE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR