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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 447367

(4)

LEWIS FOREIGN CAR SERVICE, INC.

Principal Place		Mailing Address 4430 NORTH DIXIE HWY FT. LAUDERDALE FL 33334-3820				
					3. Date Incorporated or Qualified 03/07/1974	3a. Date of Last Report 02/23/1996
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1516817	Not Applicable
Suite, Apt #, etc 22		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	6	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Coun	lry	Trust Fund Contribution 8. This corporation has liability for	7,0000 10 1 000
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	legistered Agent
	(ER, RONALD M		1	Name		
	O N DIXIE HIGHWAY LAUDERDALE FL 33334		[4	Street A	ddress (P.O. Box Number is Not Accept	able)
FI.	DAUDENDALE FL 33334			13		
				M 65		Leaf + A
			[City		FL 85 Zip Code
office or r	registered agent, or both, in the State em familiar with, and accept the oblig Signature speed a printed name of registrated as	of Florida. Such change was lations of, Section 607.0505, F	authorized lorida Statu	by the corpo	corporation submits this statement for the oration's board of directors. I hereby acc	ept the appointment as registered
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TiTL	E		☐ Change ☐ Addition
NAME	BAKER, RONALD M.		1.2 NAN	IE		
STREET ADDRESS	1930 N.W. 41ST STREET		1.3 STR	EET ADDRESS		
CHY-ST-ZIP	FT. LAUD. FL S	DELETE	_	-ST-ZIP		Change Landition
TITLE	BAKER, JOAN H		2.1 TITL			Change Addition
STREET ADDRESS	1930 N W 41TH ST		2.2 NAM	EET ADDRESS		
CITY - ST - ZIP	FT LAUD, FL 00000			Y-ST-ZIP		
TITLE		DELETE	3.1 TITL	·····	LATER CONTROL OF THE	Change Addition
NAME			3.2 NAM	l€		
STREET ADDRESS			3.3 STR	EET ADDRESS		
Crty-St-ZIP				Y-ST-ZIP		
TITLE		DELETE	4.1 TITL			☐ Change ☐ Addition
NAME PIRET ADDOCCO			4. 2 NA			
STREET ADDRESS				EET ADORESS		
CITY-ST-ZIP TITLE		DELETE	5.1 TITU	-ST-ZIP	·	Change Addition
NAME			5.2 NAM	1		E Statings E station
STREET ADDRESS				EET ADDRESS		
CITY - ST - ZIP				-ST-ZIP		
TITLE		☐ DELETE	6 1 TITL	- +		Change Addition
NAME			6.2 NAN	ie I		
STREET ADDRESS			6.3 STR	ET ADDRESS		
CITY - ST - ZIP			64 CIT	- ST - ZIP		

14. I do 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 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

SIGNATURE:

appears in Block 12 or Block

SHATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

13/97

954-4918085 Days if & Prone #

FILED

Jan 22 1997 8:00am

Secretary of State