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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 06, 1999 8:00 am Secretary of State

05-06-1999 90206 001 ***150.00

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DOCUMENT # 521444 1. Corporation Name

BAEZ AUTOMOTIVE, INC.

Principal Place of Business

6650 N.W. 77TH GT. MIAMI FL 33166	6630 N.W. 771H CT. MIAMI FL 33166		DO NOT WP	ITC IN THIS SD/	ACE.			
					DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed	i .		ì	
				12/30/1976				
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		<u> </u>	plied For	
1	26			59-1714795			t Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	□ \$	8.75 A Fee Re	Additional quired	
City & State	City & State			6. Election Campaign Financing		\$5.00	May Re	
23	28			Trust Fund Contribution	1 1	Added to	· · · · · · · · · · · · · · · · · · ·	
Zip Country	Zîp	Count	У	8. This corporation owes the cur	тепt year Intangil		_	
25	29	30		Personal Property Tax.			□No	
	Current Registered Agent			10. Name and Address of New	Registered Age	<u>nt</u>		
	-	8	1 Name	-				
BAEZ, LUIS		-	2 0	A Classic Co. Day March and Aller Accord	in Line			
6650 NW 77TH CT		8	2 Street	Address (P.O. Box Number is Not Accept	.able)			
MIAMI FL 33166	1	8	3					
		8	4 City		FI 8	5 Zip C	ode	
11 3 11 11 11 11 11 11 11 11 11 11 11 11	507 0502 and 607 1508 Florida Statut	too the abo	VO DOMO	Corporation submits this statement for the		nging its	registered	
11. Pursuant to the drovisions of Sections of office or legislated agent, or both, in the agent. I am fability with, and accept the SIGNATURE	e State of Florida. Such change was a sobiligations of, Section 607.0505, Flo	authorized b orida Statute	y the con	poration's board of directors. I hereby acce		ent as reg	gistered	
Signature, typed of printed name of regis	stered agent and title if applicable. (NOTE	E. Registered Ag	ent signature	required when reinstating)	DATE			
12. //OFFICI	ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO O				
TITLE P	☐ DELETE	1.1 TITLE				Change	☐ Addition	
NAME BAEZ, LUIS		1.2 NAMI	.				,	
STREET ADDRESS 13861 S.W. 72ND TERR		1.3 STRE	ET ADDRESS	;			ı	
CITY-ST-ZIP MIAMI FL		1.4 CITY	ST-7IP					
TITLE	☐ DELETE	2.1 TITLE				Change	☐ Addition	
		2.2 NAMI				_		
NAME								
STREET ADDRESS			ET ADDRESS	;				
CITY-ST-ZIP	F7 eriese	2. 4 CITY				Change	Addition	
TITLE	DELETE	3.1 TITLE			u	Citarige	[_] Addition	
NAME		3.2 NAMI						
STREET ADDRESS		3.3 STRE	ET ADDRESS	3			!	
CITY-ST-ZIP		3.4. CITY	-ST-ZIP					
TITLE	☐ DELETE	4.1 TITLE	:] Change	Addition	
NAME		4. 2 NAM	E				,	
STREET ADDRESS		4.3 STRE	ET ADDRESS	\$				
CITY-ST-ZIP		4.4 CITY	ST-ZIP					
TITLE	☐ DELETE	5.1 TITLE				Change	Addition	
NAME		5.2 NAMI	•			20,00		
STREET ADDRESS		5.3 STRE	ET ADDRESS					
CITY-ST-ZIP		5.4 CITY	ST-ZIP					
TITLE STATE OF A STATE OF	☐ DELETE	6.1 TITLE	:			Change	☐ Addition	
NAME		6.2 NAMI	E					
CTREET APPRECE		6.3 STRE	ET ADDRESS	s				

6.4 CITY-ST-ZIP 14. I 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 pepor or supplemental assual 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 coppulation or the recommendation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report officer or director of the corpor Block 12 or Block 13 if change with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR