SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 529892 K & B FOREIGN CAR SERVICE, INC.

(2)

97 AUG -8 AM 7: 42 SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

Principal Place of Business

.

VERO BEACH FL 32960		VERO BEACH FL 32960		DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified 03/23/1977	3a. Date of Last Report 02/02/1996
	lace of Business	2a. Mailing Address	- 14. 1 444	4. FEI Number	Applied For
	HIGWNAY US#1	28 2300 H	GHWAY U	5 31 (59-1736721	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State 28 VERO GE	ACH	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 FL	ORIDA 25 3296A		Country RI		30. 🔀 Yes 🗌 No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	ALCZYK, ZDZISLAW		81 Name		•
	GOMMERCE AVENUE 1	CHWAY NE #()	82 Street	Address (P.O. Box Number is Not Acceptab	ole)
VERC	DEACH FL 32960				
			83		
			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 rogistered agent and title if applicable (NOTE: Rog stered Agent signature required when reinstating) DATE					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	KOWALCZYK, ZDZISLAW		1.2 NAME		
STREET ADDRESS	2300 GOMMERGE AVE. HI	CHWAY US #1	1.3 STREET-ADDRESS	9000022	659990
CITY-ST-ZIP	VERO BEACH FL	,	1.4 CITY - ST - ZIP	-08/13/9	701084006
TITLE	ST	DELETE	2.1 TITLE	****165	659990 701084006 5.00
NAME	KOWALCZYK, ELZBIETA		2.2 NAME		
STREET ADDRESS	2300 COMMERCE AVE. HIC	GHWAY US #1	2.3 STREET ADDRESS		;
CITY-ST-ZIP	VERO BEACH FL		2 4 CITY-ST-ZIP		
TITLE	12.10	☐ DÉLETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAME		_ • }
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME		 ** *	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-St-ZiP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	1	ì
CITY-ST-ZIP			5.4 CITY-ST-ZIP	, on 81/3	
TITLE		DELETE	6.1 TITLE	W. I alex	Change Addition
NAME			6.2 NAME	Y	
STREET ADDRESS			6.3 STREET ADDRESS		i
CITY-ST-ZIP	au partiful that the information aupolic	ad with this files does not sugif	6.4 CITY-ST-ZIP	44 to 0 - 4 - 440 07/0V() Elected Out 4-	I forther an elife the date

I do hereby certify that the information supplied with this filling 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 12 or Block 13 if changed, or on an attachment with an address. SICHARIAN DE MANUEL HOWALCZYK 2 26 03 501 cra 302-