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

**PROFIT** CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # 529892 FOREIGN CAR SERVICE, IN	` '			1 8 8 W 3 18 W 3 18 W 3 18 W 18 W 18 W 1
Principal Place of Business Mailing Address					!
2300 HIGHWAY US #1 VERO BEACH FL 32960		2300 HIGHWAY US #1 VERO BEACH FL 32960	)		
				DO NOT WRITE IN TO	HIS SPACE
				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		03/23/1977 4. FEI Number	Applied For
21		26		59-1736721	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & Ctal		27			Fee Required
City & State	е	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country	<b>28</b>     7 <sub>1</sub> p	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	Current year Intangible  XYes  \text{No}
	g. Name and Address of Current		1001	10. Name and Address of New Register	
КО	WALCZYK, ZDZISLAW		81 Name		
2300 HIGHWAY US #1		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
VERO BEACH FL 32960					
			83		
			84 City		B5 Zip Code
office or re agent I at SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of registered agents.	of Florida, Such change was tions of, Section 607.0505, F	authorized by the cornor.		appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS.	
TITLE	PD POWALCZYW ZDZICI AM	∐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	KOWALCZYK, ZDZISLAW 2300 HIGHWAY US #1		1.2 NAME		
CITY-ST-ZIP	VERO BEACH FL 32960		1.3 STREET ADDRESS		
TITLE	ST	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	KOWLACZYK, ELZBIETA		2.2 NAME		
STREET ADDRESS	2300 HIGHWAY US #1		2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32960		2. 4 CITY-S1-7IP		
TOLE		☐ DELETE	31 TRICE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · <del>· · · · · · · · · · · · · · </del>	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		Legiste	4.4 C(1Y-S1-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME STORET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY+ST-ZIP 6.1 THTLE		Change Addition
NAME		- vereit	62 NAME		The country of the co
STREET ADDRESS			63 STREET ADDRESS		
			- VO DIMET MODILOG		

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 report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

**FILED** 

Jan 20 1998 8:00am

Secretary of State