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

DOCUMENT #

589669

(1)

GRAN MIAMI AUTO SALES, CORP.

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
3011_NW 36 ST Miami FL 33142		3510 NORTHWEST 36 STREET MIAMI FL 33142				DO NOT WRITE IN T	THIS SPACE		
		US				3. Date Incorporated or Qualified	TIGGEAGE		
						10/10/1978	··		
2. Principal Pl	2a. Mailing Address	iling Address			4. FEI Number	<u> </u> /	Applied For		
21		26				00 100000		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		d to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid th			
24	25	29	30			Personal Property Tax due June 30.		☐ No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registe	ered Agent		
ACOSTA, TOMAS				B1	Name			1	
3011 NW 36 ST			ŀ	82 Street Address (P.O. Box Number is Not Acceptable)					
	MI,FL ABW FL 33142					,			
				83					
			r	84	City		FL 85 Zip	p Code	
			41					r ito registered	
11. Pursuant to the provisions of Soctions 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 registered agr	us and title diagnication (NO)	F Begistered	1 Agent	signature requir	red when reinstating) D	ATE		
12.	OFFICERS AN	11	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12	
TITLE	В	DELETE 1.1 T		TLE			☐ Change	e Addition	
NAME	ACOSTA, TOMAS			1.2 NAME					
STREET ADDRESS	AT A LONG BUTCH AND A STILL OWNERS			1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL			1.4 CITY - ST - ZIP					
TITLE	STD DELETE			2.1 TITLE			☐ Change	e 🔲 Addition	
NAME	ACOSTA, CLODOMIRA M		2.2 NA	2.2 NAME					
STREET ADDRESS	4150 SW 94 AVE		2.3 ST	REET AT	DDRESS				
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-S1-ZIP					ļ.	
TITLE	DELETE			31 TITLE			☐ Change	e Addition	
NAME	-		3.2 NA					1	
STREET ADDRESS					DDRESS				
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CITY-ST-ZIP TITLE			4.1 1/1		.===		Change	e Addition	
NAME			4.2 N						
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NAME		<u> </u>	5.2 NA		j		·		
ļ					ODRESS				
STREET ADDRESS				TY-SI-				Ì	
CITY-ST-ZIP TITLE		☐ DELĒTĒ	6.1 TII		F."		Change	e Addition	
!		- Detect	6.2 NA						
NAME CODECT ADDRESS					DORESS				
STREET ADDRESS									
CITY-ST-ZIP			6.4 CI	TY-\$1-	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 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.

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1-15-98

2E034 (10/97)