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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 592391

(7)

BUMPER TO BUMPER, INC. Principal Place of Business Mailing Address 1917 PALM AVENUE 1917 PALM AVENUE HIALEAH FL 33010 HIALEAH FL 33010-2652 3. Date Incorporated or Qualified 3a. Date of Last Report 11/06/1978 01/31/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1863085 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ALAMO, PAUL R. **8530 MENTEITH TERRACE** Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI LAKE FL 33010 83 84 City 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 regimenot agent and tilled applicative (NOTE: Flegistered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) 3140 N. Bay Road Miami Black Fl 33140 DELETE Change 1.1 TITLE THILE ALAMO, PAUL R. 1.2 NAME NAME **ROSAL MENTERHACE** 1.3 STREET ADDRESS STREET ADDRESS MIAMI LAKE FL 1.4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE ALAMO, NICASIO 2.2 NAME NAME 734 E. 41ST STREET 23 STREET ADDRESS STREET ADDRESS HIALEAH FL CITY - ST - ZIP 2 4 CITY-ST-ZIP ST DELETE Addition TITLE 31 TITLE 5130 SOXON CITUE NUL Ft. Louder JULY 39331 DEL VALLE, EDUARDO 32 NAME NAME 11824 S.W. 54TH STREET 3.3 STREET ADDRESS STREET ADDRESS COoper City-fl 3.4. CiTY - ST - ZiP CITY-SI DELETE Change ___ Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST- ZIP 5.4 CITY - ST - ZIP Change DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 64 CITY-ST-ZIP 14. Too 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 supportation or the resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

Date