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FILED

Mar 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 702498 (7)**

1. Corporation Name

SOUTH FLORIDA AUTO-TRUCK DEALERS ASSOCIATION, IN C.

Principal Place of Business

Mailing Address

% RICHARD A. BAKER
10185 N.W. 7TH AVE.
MIAMI FL 33150% RICHARD A. BAKER
10185 N.W. 7TH AVE.
MIAMI FL 33150-13033. Date Incorporated or Qualified
05/29/19613a. Date of Last Report
02/15/19964. FEI Number
59-1094645

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAKER, RICHARD A.
10185 NW. 7TH AVE.
MIAMI FL 33150

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME CARROLL, JIM
STREET ADDRESS 3101 NORTH STATE ROAD 7
CITY - ST - ZIP HOLLYWOOD FL1.1 TITLE P/E ☐ Change ☒ Addition
1.2 NAME PLANAS, CARLOS
1.3 STREET ADDRESS 8250 SW 8 STREET
1.4 CITY - ST - ZIP MIAMI FL 33144TITLE D ☐ DELETE
NAME MORSE, TED
STREET ADDRESS 6363 N W 6TH WAY
CITY - ST - ZIP FT LAUDERDALE FL2.1 TITLE P ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE VP ☐ DELETE
NAME BAKER, RICHARD
STREET ADDRESS 10185 NW 7 AVE.
CITY - ST - ZIP MIAMI FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME PAGE, KEN
STREET ADDRESS 9330 W ATLANTIC BLVD
CITY - ST - ZIP CORAL GABLES FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME MOORE, STEVE
STREET ADDRESS 5757 LAKE WORTH ROAD
CITY - ST - ZIP GREENACRES CITY FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE D ☒ DELETE
NAME AHMED, FAISAL
STREET ADDRESS 21151 N W 2ND AVE
CITY - ST - ZIP MIAMI FL6.1 TITLE ☐ Change ☒ Addition
6.2 NAME ACCARDI, EDDIE
6.3 STREET ADDRESS 909 S FEDERAL HWY
6.4 CITY - ST - ZIP POMPANO BEACH FL 33062

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0030788

CR2E037 (9/96)