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

CITY-ST-ZIP

FILED PROFIT May 21 1998 8:00am FUORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # F23205 (O) MY GARAGE, INC. Principal Place of Business Mailing Address 4737 SW 74TH AVE 4737 SW 74TH AVE MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 02/20/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2080919 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country B. This corporation owes or has paid the current year Intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CARLOS, THOMAS P 999 PONCE DE LEON BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 **CORAL GABLES FL 33134** 83 64 City 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 pristed name of registered agent and time if applicable (NOTE Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition METKA, JAMES NAME 1.2 NAME 7320 SW 122 ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE Change Addition TITLE 2.1 TITLE METKA, ANDREA NAME 2.2 NAME 7320 SW 122 ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 2.4 CITY-S1-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE Change ☐ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

6.4 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 suppliemental 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 employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changing or on an attachment with au address.

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