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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State •• DIVISION OF CORPORATIONS

DOCUMENT # F37286

(4)

Mailing Address

S. & O. AUTOMOTIVE SERVICE CORP.

FILED Feb 10 1997 8:00am Secretary of State

4499 E. 10TH / HIALEAH FL 33		4498 E. 10TH AVENUE HIALEAH FL 33013-2515							
						3. Date Incorporated or Qualified 06/04/1981	L	te of Last R 3/1996	leport
2. Principal P	face of Business	26. Mailing Address	-			4. FEI Number		Ar	pplied For
21		26				59-2100148			ot Applicable
Suite Apt.	# etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	le	City & State			,	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Ζφ 24	25 29 30				buntry 8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes 2 Yes No				
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent	
ORT	TEGA, SIXTO R			81 N	ame				
	West 38th Street Leah FL 33012			82 S	reet Add	ress (P.O. Box Number is Not Acceptab	le)		
118-8	DEPAIT OF THE			83					
				84 C	ity		FL	85 Zip	Code
office or agent. La	to the provisions of Sections 607.6 registered agent, or both, in the Starn familiar with, and accept the ob	usuz and 607.1508, Florida st late of Florida Such change w digations of, Section 607.0505	atutes, the al ras authorize i, Florida Stat	oove-na d by the lutes.	imed corj e corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose or of the appx	changing i sintment as	ts registered registered
	September typing or yet oand of registered			d Agent sk	gnature requ	red when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
7171.6	P ADTECA ANGE D	☐ DELETE	1.1 10	TLE	-			Change	Addition
NAME	ORTEGA, SIXTO R		1,2 N	AME					
STREET ADDRESS	92 WEST 38TH STREET		1.3 ST	REET ADD	RESS				
City - S1 - ZiP	HIALEAH FL			TY-ST-ZI					
THTLE	T	☐ DELETE	2.1 TI	TLE				Change	Addition
NAME	PEREZ,CIRILO O.		2.2 N	AME					
STREET AUDITESS	870 W. 68TH STREET		2.3 \$1	REET ADD	RESS				
CITY - ST - ZIF	HIALEAH FL			ITY - ST - Z	P				
TITLE		☐ DELETE	3.1 Ti	TLE				Change	Addition
NAME			3 2 N	AME					
STREET ADDRESS			3.3 51	REET ADD	RESS	·			
CITY - S1 - ZIP				TY-ST-Z	P			Г-1	····
TITLE		☐ DELETE	4.1 TI	TLE				☐ Change	L Addition
NAME			4. 2 N	AME	-				
STREET ADDRESSS	1		4.3 S	TREET ADO	RESS				
CHY-ST-ZIP		Dr. Fre		TY-ST-ZI	P			-	
TITLE		☐ DELETE	5.1 TI					Change	Addition
NAME			5.2 N	AME	-				
STREET ADDRESS			5.3 \$	FREET ADD	RESS				
CITY: ST: ZIP				TY-ST-71	P			P-144	
TITLE		DELETE	6.1 TI	TLE				Change	☐ Addition
NAME	+		6.2 N	ame	1				
STREET ADDRESS			6.3 \$	TREET ADD	ress -				
CITY-SI-ZP			6.4 0	TY-\$1-2	P				

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 607, 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 THE OF PRINTED NAME OF SIGNING SPICER OF DIRECTOR

+ 2/3/97

T 305: 68/-6355