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PROFIT CORPORATION **ANNUAL REPORT**

1998

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F48918

(9)

SABAL PALM AUTO PARTS & EXPORT, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address C/O VICTOR CASTRO C/O VICTOR CASTRO 174 N.E. 54 ST. 174 N.E. 54 ST. DO NOT WRITE IN THIS SPACE MIAMI FL 33137 MIAMI FL 33137 3. Date Incorporated or Qualified <u>10/30/1981</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2138582 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 25 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 CASTRO, VICTOR 174 N.E. 54 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33137** B3 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 registered agont as distile if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 11 TITLE Addition TITLE CASTRO, IDOLIDIA NAME 1.2 NAME 1800 NW 30 AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE CASTRO, VICTOR 2.2 NAME NAME 1800 NW 30 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CiTY - ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 of 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 regeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 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 on or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or on an Arachment with an Oldress. Block 12 or Block 13 if change

20/20/11