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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # F7422 HESTER AUTO CENTER,				
Principal Place	o of Rusmass	Mailing Address		יום ונחום ואסנס ווסוס ווחום וחולם וחוג סוסנו סוסנו חומום מוחום וחומו החומו וווו ספונססו	
2500 S.W. 87TH AVENUE 10851 NORTH KENDALL DRIVE MIAMI FL 33165		2500 S.W. B7TH AVENUE 10851 NORTH KENDALL DRIVE MIAMI FL 33165-2029			
				3. Date Incorporated or Qualified 03/30/1982 3a. Date of Last Rej 02/07/1996	
2, Principal Place of Business		2a. Mailing Address 26		ma a sa sa sa m	Applicable
21 Suite, Apt. #, etc		Suite, Apt. #, etc.		\$8.75 40	
22		27		5. Certificate of Status Desired Fee Req	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
Zip Country		28 Zip	Country	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes Yes No	199.032,
	9. Name and Address of Curi	· ·		10. Name and Address of New Registered Agent	
LIM/	l, Hemeregildo		81 Name		
2500 S.W. 87TH AVENUE			82 Street Addi	ress (P.O. Box Number is Not Acceptable)	·
MIAI	VII FL 33165		83		
			[53]		
			84 City	FL 85 Zip C	ode
11. Pursuant	to the provisions of Sections 607 C	502 and 607.1508, Florida Stati	ites, the above-named corp	poration submits this statement for the purpose of changing its	registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the ob-	ite of Florida, Such change was ligations of, Section 607,0505, F	authorized by the corporal lorida Statutes.	poration submits this statement for the purpose of changing its lion's board of directors. I hereby accept the appointment as re-	egistered
SIGNATURE	·- · · · · · · · · · · · · · · · · · ·				
	Signature Type For pentrefinance of regions of		TE Registered Agent signature requi		
12.	OFFICERS /	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Addition
NAME	HEMEREGILDO, LIMA		1.2 NAME		
STREET ADDRESS	2500 SW 87TH AVE		1.3 STREET ADDRESS		İ
CHY-ST 7P	MIAMI FL 33185		1.4 CITY - ST - 2IP		
TITLE		[] DELETE	217ITLE	Change	Addition
NAME (2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY+ST-ZIP TITLE		DELETE	2 4 CITY-ST-ZIP 31 TITLE	Change	Addition
NAME (3.2 NAME	- Charge	
STREET ADORESS			3 3 STREET ADDRESS		
CITY-S1-7IP			3 4 CITY-ST-ZIP		
7)11.6		DELETE	4 1 TITLE	Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
D/TY - ST - ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change	Addition
NAME		Em vicent	5.2 NAME	Lind Oldingo	
STREET ADDRESS			5.3 STREET ADDRESS		
City - S1 - 7iP			5.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	6 1 TITLE	Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-ZIP	by cert by that it in information or see	and with this tripo door not one	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes. I further certify that the	he
intormatio Lam an ol	o indicaled on this annual report o	or supplemental annual report is or the receiver or trustee empo	true and accurate and that wered to execute this repo	t my signature shall have the same legal effect as if made undi it as required by Chapter 607, Florida Statutes; and that my na	er cath: that i

SIGNATURE

SIGNATURE AND TYPES OF PRINTED NAME OF STANING OFFICER OF DIRECTO

1/12/97

Daytime Phone # 0222034

FILED

Jan 24 1997 8:00am

Secretary of State