


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F85972

1. Entity Name
 SOUTH MOTORS BUICK, INC.



Principal Place of Business
 16215 S. DIXIE HIGHWAY
 MIAMI, FL 33157

Mailing Address
 16215 S. DIXIE HIGHWAY
 MIAMI, FL 33157

DO NOT WRITE IN THIS SPACE



07022004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2196155	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOFFMAN, LARRY J.
 1221 BRICKELL AVENUE
 MIAMI, FL 33131

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOFFMAN, LARRY J 1221 BRICKELL AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DASCAL, CHARLES 1801 SW 1ST STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFAS HILTON, JOHN 16165 S. DIXIE HWY MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD VILLAMANAN, MANUEL 16165 S. DIXIE HWY MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHARIFF, JONATHAN 16165 S DIXIE HWY MIAMI, FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

07/19/04-80010-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John A. Hixson, CFO Date: 7-6-04 Daytime Phone #: 305-256-2317

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR