

STATEMENT OF OFFICERS AND DIRECTORS TO BE FILED ON OR AFTER JANUARY 1, 1995  
 ANNUAL REPORT ON OR BEFORE APRIL 30 OF EACH YEAR, BEGINNING ANNUITY DUE TO INCORPORATION

**PROFIT CORPORATION ANNUAL REPORT 1995**

**FLORIDA DEPARTMENT OF STATE**  
 Sandra B. Morburn  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # G29786 (2)**  
 1. Corporation Name  
**J. P. AUTO TRADERS, INC.**

Principal Place of Business: **601 S.W. 20TH ROAD MIAMI FL 33129**  
 Mailing Address: **601 S.W. 20TH ROAD MIAMI FL 33129**

**FILED**  
**95 JUL -5 AM 8:58**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **21** Sute, Apt #, etc. **22** City & State: **23**  
 2a. Mailing Address: **26** Sute, Apt #, etc. **27** City & State: **28**  
 24 Zip: **25** Country: **29** Zip: **30** Country:

3. Date Incorporated or Qualified: **03/10/1983** 3a. Date of Last Report: **05/01/1994**  
 4. FEI Number: **59-2286426** Applied For:  Not Applicable:   
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**PINEDA, BARBARA**  
**39 S.W. 5TH AVENUE**  
**MIAMI FL 33130**

10. Name and Address of How Registered Agent  
**01** Name  
**02** Street Address (P O Box Number is Not Acceptable)  
**03**  
**04** City **FL** **05** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 in printed name of registered agent and the filer also in) (NOTE: Registered Agent signature required when registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>PTD</b>
NAME	<b>PINEDA, JOSE M.</b>
STREET ADDRESS	<b>601 S.W. 20TH ROAD</b>
CITY, ST, ZIP	<b>MIAMI FL</b>
TITLE	<b>VSD</b>
NAME	<b>PINEDA, BARBARA</b>
STREET ADDRESS	<b>601 S.W. 20TH ROAD</b>
CITY, ST, ZIP	<b>MIAMI FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHARACTERS TO OFFICERS AND DIRECTORS, ETC.

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE: \_\_\_\_\_ (Signature typed in printed name of signing officer or director) **06/30/95 (305) 442-2083**

CR2E034 (3/95)