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

PROFIT CORPORATION ANNUAL REPORT

1999

EF AUTO ELECTRIC, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED May 06, 1999 8:00 am Secretary of State Katherine Harris Secretary of State

05-06-1999 90231 018 ***150.00



Principal Place	e of Business	Mailing Address						
5083 NORTH FEDERAL HIGHWAY 5083 NORTH FEDERAL HIGHWAY			AY					
POMPANO BEACH FL 33064 PO		POMPANO BEACH FL 33064				DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualifed			
						06/15/1986		
a Dringing Di	loan of Puninees	2a, Mailing Address				4. FEI Number Applied For		
-	lace of Business	⊢ •				59-2758966 Not Applicable		
Suite, Apt.	# oto	Suite, Apt. #, etc.				\$8.75 Additional		
	#, BIG.	27				5. Certificate of Status Desired Fee Required		
22 City & State		- City & State				6. Election Campaign Financing 55.00 May Be		
—	•	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year Intangible		
24	25	29 30	1	•		Personal Property Tax. Yes No		
	9. Name and Address of Current		1			10. Name and Address of New Registered Agent		
EADI			l	81 N	ame	LIGHTER, JAY		
	a, everardo B north federal Highway		Ì	82 S	treet A	Address P-3 Box Number is Not Acceptable HW T		
POM	IPANO BEACH FL 33064		ŀ	83				
l		_	.	84 C	ign.	WPAND BEACH, FL 85 ZDCOde 64		
		/						
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State or	and 607.1508, Floride Statutes, f Florida. Such change was auty	prized	oove-na by the	corpor	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered		
agent. I ai	m familiar with, and accept the obligation	ons of, Section 607.0505. Florida	: Statu	ites.		11/21/00		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NITE: Re	gistered	Agent sign	nature rec	9/9/99 partired when reinstalling) DATE		
12.	OFFICERS AND	DIRECTORS //	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 TIT	LΕ		PRESIDENT Addition		
NAME	Faria, everardo	'	1.2 NA	ME	- 4	SOBJ NORTH FOODERNE HIGHWAY		
STREET ADDRESS	5083 NORTH FEDERAL HIGHWA	AY .	1.3 ST	REET ADD	DRESS	5083 NOW (H FORDING		
CITY-ST-ZIP	POMPANO BEACH FL 33064		1.4 CIT	Y-ST-ZIP	,	DOM PANO BEACH, FL 33064		
TITLE	S	DELETE	2.1 TIT	Œ		☐ Change ☐ Addition		
NAME	FARIA, EDMAR	′ !	2.2 NA	ME				
STREET ADDRESS	ALODEL		2.3 ST	REET ADD	DRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33064		2. 4 Cf	TY-ST-ZII	P			
TITLE		☐ DELETE	′3.1 TIT	TE		Change Addition		
NAME			3.2 NA	ME	}			
STREET ADDRESS			3.3 ST	REET ADD	ORESS			
CITY-ST-ZIP		_	3.4. CI	TY-ST-ZI	Р			
TITLE		☐ DELETE	4.1 TIT	LE		☐ Change ☐ Addition		
NAME			4. 2 NA	AME	-			
STREET ADDRESS			4 3 ST	REET ADO	DRESS			
CITY-ST-ZIP				TY-ST-ZIF	- 1			
TITLE		☐ DELETE	5.1 TIT		\neg	☐ Change ☐ Addition		
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET ADD	DRESS			
CITY-ST-ZIP			5.4 CIT	TY-ST-ZIF	,			
TITLE		☐ DELETE	6.1 TIT	T.E		☐ Change ☐ Addition		
NAME			6.2 NA	ME	ļ			
STREET ADDRESS			6.3 ST	REET ADD	DRESS			
CITY-ST-ZIP	_	γ	6.4 CIT	TY-ST-ZIF	,			
I OUT-SHADE								

14. I 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 appear of the corporation of the corpora

SIGNATURE: __

YFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(AREGONS)