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

Jun 04 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of Staté 1**9**98 DIVISION OF CORPORATIONS DOCUMENT # J52361 (9)A&E AUTO ELECTRIC. INC. Principal Place of Business Mailing Address 110 S. DIXIE HIGHWAY 110 S. DIXIE HIGHWAY HALLANDALE FL 33009 HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/16/1987 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 59-2765794 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 Personal Property Tax due June 30. 29 30 ΠNo 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent **ELALOUF, ARMAND** В1 OSEPH 110 S. DIXIE HIGHWAY 82 Street . HALLANDALE FL 33009 83 84 City 85 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 607.0508, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) DAT OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE. 1 1 TITLE Change **ELALOUF, ARMAND** NAME 12 NAME 2121 N. 53RD AVE. STREET ADDRESS 13 STREET ADDRESS HOLLYWOOD FL CITY-\$T-ZIP 1.4 CITY - ST - ZIP PRESIDENT TITLE DELETE 21 TITLE Change ■ Addition Joseph Elacof NAME 2.2 NAME Advon57 th STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 1111.6 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TATLE DETFTE 5.1 BITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP 7.TLE DELETE 6.1 TITLE Channe Addition N/AME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 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 attachment with an address.

FILED