

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J70599 (2)

1. Corporation Name

MYKONIAN AUTO SALES AND MAINTENANCE, INC.



Principal Place of Business

Mailing Address

1752 S STATE ROAD 7
N LAUDERDALE FL 33068

1655 SO SR 7
N LAUDERDALE FL 33068
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 C/O AFFORDABLE FINANCE

22 City & State

27 705 S. STATE ROAD 7

23 Zip

Country

28 MARGATE FL

Country

24

25

29 33068

30

USA

3. Date Incorporated or Qualified

04/29/1987

3a. Date of Last Report

07/07/1995

4. FET Number

59-2795930

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, DAVID J
1665 SO SR 7
N LAUDERDALE FL 33068

81 Name

SPIRO LAZARO

82 Street Address (P.O. Box Number is Not Acceptable)

2871 NE 18TH ST

83

84

POMPANO BEACH

FL

85 Zip Code

33062

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 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

7/11/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LAZAROU, SPIRO
STREET ADDRESS 1752 S STATE R 7
CITY - ST - ZIP N LAUDERDALE FL

☐ DELETE

TITLE VD
NAME SARANDAENAS-KARVELA, VAS
STREET ADDRESS 6760 KIMBERLY BLVD
CITY - ST - ZIP NORTH LAUDERDALE FL

☒ DELETE

(DELETE)

TITLE V
NAME MARTINEZ, HENRY
STREET ADDRESS 1655 STATE ROAD 7
CITY - ST - ZIP NORTH LAUDERDALE FL

☒ DELETE

(DELETE)

TITLE ST
NAME JONES, DAVID J
STREET ADDRESS 1665 S STATE ROAD 7
CITY - ST - ZIP NORTH LAUDERDALE FL

☒ DELETE

(DELETE)

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

V
LAZARO, WENDY
2871 NE 18TH ST
POMPANO BEACH, FL, 33062

☐ Change

☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

ST
AMANNA, PANAGIOTA
6730 KIMBERLY BLVD
N. LAUDERDALE, FL, 33068

☐ Change

☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/96

(954) 974-3313

EXT. 12

CR2E034 (3/96)