May 04, 1999 8:00 am Secretary of State

05-04-1999 90193 035 ***158.75

Mailing Address % KEVIN SWAD

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Recretary of State DIVISION OF CORPORATIONS

DOCUMENT # K26379

1. Corporation Name

Principal Place of Business

% KEVIN SWAD

OCEAN AUTO SALES & RENTAL, INC.

2901 SOUTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33316		2901 SOUTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33316			DO NOT WRI	TE IN THIS S	SPACE	
TONT CHOPEN	THE TE GOOTO	TOTAL CAUSE TO SEE	0		3. Date Incorporated or Qualifed 06/13/1988			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21		26			65-0052673 Not Applicat			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	Count	ТУ	This corporation owes the curr Personal Property Tax.	ent year Inta	ngible 12 Yes	□No
,	9. Name and Address of Current				10. Name and Address of New F	Registered A	gent	
			8	1 Name				
SWA	.D, KEVIN		_	2 Chanal Ad	dress (P.O. Box Number is Not Accepta	able\		
2901	South Federal Highway		82 Street Addr		dress (P.O. Box Number is Not Accepta	able)		
FOR	T LAUDERDALE FL 33316		8	3				<u>—"</u>
			_				Ta-1 3:	0-4-
			8	4 City		FL	85 Zip	Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was a	uthonzed b	v the corpora	rporation submits this statement for the tition's board of directors. I hereby acceptions	purpose of o ot the appoin	hanging it tment as r	s registered egistered
SIGNATURE		NOTE A	. Deviatored &	and a deciding semi-	ired when reinstating)	DATE		
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	ent signature requ	ADDITIONS/CHANGES TO OF		DIRECT	ORS IN 12
TITLE	D OFFICERS AND	DELETE	1.1 TITLE		Apprilation and a second as a	, , , , , , , , , , , , , , , , , , , ,	☐ Change	☐ Addition
	SWAD, KEVIN		1.2 NAME	1				
NAME	2901 S. FEDERAL HIGHWAY			ET ADDRESS				
STREET ADDRESS	FORT LAUDERDALE FL		1.4 CITY					
CITY-ST-ZIP TITLE	D	☐ DELETE	21 TITLE				☐ Change	☐ Addition
NAME	SWAD, ANNETTE G.		2.2 NAME	i			_ ,	_
	2901 S. FEDERAL HIGHWAY			ET ADDRESS				
STREET ADDRESS	FORT LAUDERDALE FL		2.4 CITY	ļ				
CITY-ST-ZIP TITLE	FORT ENDERDALE TE	☐ DELETE	3.1 TITLE				Change	Addition
ļ			3.2 NAM	l				
NAME				ET ADDRESS				
STREET ADDRESS			3.4. CITY					
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE			<u>.</u>	Change	Addition
NAME		_ 5000,0	4. 2 NAM					
STREET ADDRESS				ET ADDRESS				
ĺ			4.4 CITY					
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME		-	5.2 NAME				•	
STREET ADDRESS			5.3 STRE	ET ADDRESS				
1			5.4 CITY					
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE				Change	Addition
			6.2 NAMI	1			3-	_
NAME				ET ADDRESS				
STREET ADDRESS			6.4 CITY	į.				
CITY-ST-ZiP			0.7 011 1	91740				

CITY-ST-ZIP

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 attachment with an address, with all other like empowered.