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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Jan 31 1997 8:00am

Secretary of State

305-1811-0085

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K59180

(5)

D & A FINE CARS, INC.

SIGNATURE:

Principal Place of Business Mailing Address 9850 NW 27 AVE 6440 HURON TERR MIAMI FL 33147 DAVIE FL 33331-2139 บร 3. Date Incorporated or Qualified 3a. Date of Last Report 01/13/1989 04/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0104038 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζφ Country 8. This corporation has liability for intangible tax under s. 199.032. 24 Yes 🔲 No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAMINS, AL 6440 HURON TERR 82 Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33331** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.05.02 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. Landfarmhar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signatine, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TITLE Change Addition 1.1 TILLE KAMINS, AL NAME 1.2 NAME 9937 NW 27TH AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE Change ☐ Addition 2.1 THLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET AODRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 3.4. CHY-ST-ZIP DELETE 4.1 HILE ☐ Change ___ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CHTY-ST-ZIP DELETE TITLE 511016 Change Addition NAME 5.2 NAME STREET ADDR: SS 5.3 STREET ADDRESS CHTY-\$1-7IP 5.4 CITY - ST- 2/P DELETE THE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CCTY - ST - 7IP 6.4 CITY - ST-2IP 14. I do hereby certify that the informati ed with this for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual I am an officer or director of the cor al annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that or crustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name report oratio appears in Block 12 or Block 13 d