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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name K72883

K & M AUTO SALES, INC.

(7)

Apr 18 1996 8:00 am Secretary of State

FILED



Principat Place of Business Mailing Address						à libaliària dia rabita madis ralian rarah min diata anam drara anam diata anam			
10798 N.W. 7 Mjami Fl. 331		10798 N.W. 7TH AVE. MIAMI FL 33168							
						3. Date Incorporated or Qualified 03/15/1989	3a. Date 06	/20/19	95
2. Principal Place of Business		2a. Mailing Address	··-						Applied For
21		26				65-0110948 Not Applicable			
Suite, Apt #		Suite, Apt. #, etc.	7			5. Certificate of Status Desired Security Securi			
City & State		Oity & State				Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Zip	Gountry	Zip	⊢ γ			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30	Г		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Currer	it Registered Agent		81	Name	10. Name and Address of New F	egistered A	gent	
DDH ICKI	AAN, JACK			82		(0 C D N - N - N - N - N - N - N - N - N - N	Maria de Cara		
18151 N	E 31ST CT. STE PH114				Street Addi	ess (P.O. Box Number is Not Acceptable)			
N. MIAM	II BEACH FL 33160			83	City			85 7	ıp Code
				04	Gity.		FL	65 4	ip code
or registere familiar wit	o the provisions of Sections 607.0502 ed agent, or both, in the State of Fiori h, and accept the obligations of, Sect	din Such change was authoriz	zed by the c	ive n corpic	amed corpo oration's boa	ration submits this statement for the purific of directors. Thereby accept the app	pose of char ointment as i	nging its registered	registered office diagent I am
SIGNATURE _	Signature: typed or printed name of registered area	and the diagon, die (N	TE Registered	Ajen	t signature require	whente states	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF			
TIFLE	D	DELETE	1 1 1	TLE			L.] Change	Add tion
NAME	KETANT, JOSEPH E.		1 2 N						
STREET ADDRESS	1290 NW 120TH ST				ADDRESS				
CITY-ST-ZIP	N. MIAMI FL	DELETE	14 CHY+ST-ZiF' 2 1 TITLE		1 - 2iP] Change	Addition
TITLE	D COTANIT MADE (CANNE	[] DECEIL	2 1 MUE 22 NAME				L.] Change	[] Muonion
NAME	KETANT, MARIE JEANNE 1290 NW 120TH ST		2.3 STREET		ND DOCCC				
STREET ADDRESS	N. MIAMI FL		2.4 CITY						
CITY-ST-ZIP TITLE	N. MIAMI FL	DELETE	3 1 111		Zat.) Change	☐ Addition
NAME			3.2 N				-		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY - S					
TITLE		DELFTE	DELFTE 4 11					Change Addition	
NAME			42 N	AMÉ					
STREET ADDRESS			435	THEFT	ADDRESS				
CITY-SI-ZIP			44 C	HY-5	T-21P				
TITLE	☐ DELETE :		5 1 T	5 1 TIT.E		Change Addition			
NAME			5 2 N	AMÉ					
STREET ADDRESS			538	TREET	ADDRESS				
CITY-ST-ZIP			540	ITY - S	T - ZIP				
TITLE		☐ DELETE	6 t T	11LE] Change	Addition
NAME	!		6 2 N	AME					
STREET ADDRESS			63\$	THEET	ADORESS				
CiTY-ST-ZIP	<u> </u>		640	IIV-S	1-709	y	A3-3-2- E		

I do hereby certify that the information supplied with this filing certify that the information indicated on this annual report or eath, that I am an officer or director of the corporation or the furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I further
annual report in true and accurate and that my signature shall have the same legal effect as if made under
kisted employabled to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE

SIGNING OFFICER OR DIRECTOR