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

PROFIT . CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K93721

1999

JESUS AUTO SALES, CORP.

Principal Place of Business Mailing Address % JESUS L. MORENO % JESUS L. MORENO 3398 N.W. 53RD ST 3398 N.W. 53RD ST DO NOT WRITE IN THIS SPACE MIAMI FL 33142 MIAMI FL 33142 3. Date Incorporated or Qualifed 06/08/1989 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 65-0126450 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible Yes □No Personal Property Tax. 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MORENO, JESUS L. 82 Street Address (P.O. Box Number is Not Acceptable) 3398 N.W. 53RD ST **MIAMI FL 33142** 83 85 Zip Code City 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS DELETE Change ☐ Addition 1.1 TITLE TITLE MORENO, JESUS L. 1.2 NAME NAME 148 E. 4TH ST 1,3 STREET ADDRESS STREET ADDRESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE DVP 2.2 NAME HORENO, FILOMENA M. NAME 2.3 STREET ADDRESS STREET ADDRESS 148 E. 4TH ST. HIALEAH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 31 TITLE ππΕ

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.

3.2 NAME

4.1 TITLE

4. 2 NAME

51 T/B F

5.2 NAME

5.1 TITLE

6.2 NAME

☐ DELETE

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3.3 STREET ADDRESS

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NAME

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301-448-3323

Change

Change

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FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90035 003 ***150.00

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