FILE NUW: FILING FEE 18 \$61.25

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

. 1998

Secretary of State DOCUMENT # L20081 L & M AUTO CENTER, INC. Principal Place of Business Mailing Address 10400 S.W. 184 TERRACE 10400 S.W. 184 TERRACE 3. Date Incorporated or Qualified MIAMI, FL 33157 MIAMI, FL 33157 10/02/89 4. FEI Number Applied For 65-0147704 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional П 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Sulte, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Added to Fees 27 Trust Fund Contribution City & State City & State profit corporation a homeowners association? Yes No 23 28 Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. XX Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name ANTHONY BERNARD 10201 S.W. 95 AVENUE # 109 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33157 City Zip Code 84 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15 OFFICERS AND DIRECTORS 13. Change TITLE DELETE Addition 11 TITLE NAME LEONARD VINCENT SHIELDS 1.2 NAME STREET ADDRESS 10400 S.W. 184 TERRACE 1.3 STREET ADDRESS MIAMI, FL 33157 CITY-ST-ZIP 1.4 OUTY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ☐ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP 0000024674 PG^{ange} -03/25/98--01004--013 TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS ***150.00 **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 suppliented at 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ICER OR DIRECTOR

3/19/98

Daytime Phone # 002145

FILED

Mar 24 1998 8:00am