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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 AM 8:57

DOCUMENT # L21008

(2)

1. Corporation Name

JESSY AUTO SALES INC.

Principal Place of Business

% ODALIS RODRIGUEZ
3624 N.W. 36TH ST.
MIAMI FL 33142

Mailing Address

% ODALIS RODRIGUEZ
3624 N.W. 36TH ST.
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/06/1989 3a. Date of Last Report 01/19/1994

4. FEI Number 65-0151344 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 3624 N.W. 36 ST

Suite, Apt. #, etc.

22

City & State

23 Miami - FL

Zip

24 33142

Country

25 USA

2a. Mailing Address

26 3624 N.W. 36 ST

Suite, Apt. #, etc.

27

City & State

28 Miami - FL

Zip

29 33142

Country

30 USA

9. Name and Address of Current Registered Agent

RODRIGUEZ, ODALIS
13280 NW 43 AVE
DOOR #3
OPA LAOCK, FL FL 33054

10. Name and Address of New Registered Agent

81 Name Rodriguez, Odalis
82 Street Address (P.O. Box Number is Not Acceptable) 9856 N.W. 26 AVE
83
84 City Miami FL 85 Zip Code 33147

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 Odalis Rodriguez 01/30/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTICE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	DELREY, ALEJANDRO
STREET ADDRESS	340 WEST 55 STREET
CITY-ST-ZIP	HIALEAH FL
TITLE	VP
NAME	RODRIGUEZ, JULIO
STREET ADDRESS	1075 WEST 68TH ST. #101
CITY-ST-ZIP	HIALEAH FL
TITLE	S
NAME	RODRIGUEZ, ODALIS
STREET ADDRESS	1075 WEST 68TH ST. #101
CITY-ST-ZIP	HIALEAH FL
TITLE	P
NAME	DEL REY, ORLANDO
STREET ADDRESS	228 WEST 18TH ST
CITY-ST-ZIP	HIALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	RVP Rodriguez, Julio
2.3 STREET ADDRESS	9856 N.W. 26 AVE
2.4 CITY-ST-ZIP	Miami - FL 33147
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	S Odalis Rodriguez
3.3 STREET ADDRESS	9856 N.W. 26 AVE
3.4 CITY-ST-ZIP	Miami - FL 33147
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	T Del Rey, Orlando
4.3 STREET ADDRESS	228 W. 18 ST
4.4 CITY-ST-ZIP	Hialeah - FL
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 and is signed, or is accompanied with an address.

SIGNATURE: Julio Rodriguez VP 01/30/95 638-8823
(Signature, typed or printed name of signing officer or director) DATE