ANNUAL REPORT 1998 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED 98 MAR 23 PN 3: 39		
LING FEE Annual Report \$100.00 + \$88				-	MATSIATE
\$ 188.75 Make Check Payable To: FI Name and Mailing Address of Limited Liability Company DOCUME	NT # L 9700		}]		A. C.
			1a. Principal Pla	ce of Business	Address
Auto U.S.A. Export, L.L.C. 916 NE 79 street			13851		27 Ave
916 NE 79 Street			Miam	1 Pt	33054
Miami Beach F	7			•	
Principal Place of Business 13851 NW 27 Avenue 1521 Alton Rd		- 6 4	3. Date Organize		3a. State of Formation
3851 NW 27 Avenue 1521 Altor		nka	9/25)	97	Florida -
ty & State City	2 <u>25</u>	·····	4. FEI Number		Applied For
	liami Beach	, Fi	5. Date of Last P	lenort	Not Applicate 6. Certificate of Status Desire
p Country Zip		USA	0. 54.0 0. 640	opon.	S8 75 Additional Fee Required
7. Name and Address of Current Regist		8. 1	l Name and Addres	of New Regis	tered Agent/Office
Banker M. Adam. Namples			Duke		
4800 N Tederal Hwy		Street Address (P.O. Box Number is Not Acceptable)			
	3431	/385/ N. Sulte, Apt. #, etc.	W KIN	Ave	
Pere Duke.	,	City - OA			Zip Code
		OPA_	LOCKA	FL	33054
Pursuant to the provisions of Sections 608.416 and 600 registered office or registered agent, or both, in the State	8.508, Florida Statutes, the a of Florida. Such change was	above-named limited authorized by affirma	liability company si tive vote of a majorit	ubmits this state y of the member	ement for the purpose of changings. I hereby accept the appointme
registered agent, and accept the obligations.					
GNATURE (Registered Agent Accepting Appointment	ent) (NOTE Registered Agent signatu	re required when reinstating		DATE	
. Title Managing Members/Managers		Business Street Address			State and Zip Code
6 PM Denny Anthony	_	13851 NW 27AU			1 FL 33054
	13851 N	13851 NW 27A1		Mian	n Pl 33054
6114 DUKE Peter			20	റ്റ്റാ	ACCOCO
bin Duke Peter	l			-03/24	466868-016 /98-01085-016
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biny Duke Peter					3-24
biny Duke Peter					3-24

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

SIGNATURE: 4