

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M01587 (8)
1. Corporation Name
CABAL AUTO SALES, INC.

Principal Place of Business
2280 S. STATE ROAD 7
MIRAMAR FL 33023

Mailing Address
2280 S. STATE ROAD 7
MIRAMAR FL 33023



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1406 South State Rd 7 Suite, Apt. #, etc. 22 City & State Hollywood FL 23 Zip 33023 24 Country USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/08/1984	
4. FEI Number 26-3085107		5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		9. Name and Address of Current Registered Agent BALDOR, ROBERTO 3600 SW 139TH AVENUE CB 230 MIRAMAR FL 33027		10. Name and Address of New Registered Agent	

81 Name		82 Street Address (P.O. Box Number is Not Acceptable)		83	
84 City		85 Zip Code		FL	

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 _____ DATE 4/29/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	3600 SW 139TH AVE CB230	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
CITY-ST-ZIP	MIRAMAR FL	2.1 TITLE	2.2 NAME
TITLE	STD	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
NAME	BALDOR, BERTA	3.1 TITLE	3.2 NAME
STREET ADDRESS	3600 SW 139TH AVE CB230	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
CITY-ST-ZIP	MIRAMAR FL	4.1 TITLE	4.2 NAME
TITLE		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
NAME		5.1 TITLE	5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
CITY-ST-ZIP		6.1 TITLE	6.2 NAME
TITLE		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
NAME			
STREET ADDRESS			
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.

SIGNATURE _____ DATE 4/29/98

CR2E034 (10/97)