FILED

| FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 | | | | | _Mar 20 1997 8:00am | | |
|--|--|--|--|---|---|---|-----------------------------|
| PROFIT CORPORATION ANNUAL REPORT 1997 | | | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | Secretary | | |
| | MENT # M AUTO, INC. | 21593 | (2) | | 1 100 100 11 1100 | 11 A.B.) B.S.) A.B.) #(A.) B.S.) | B:B0: 15B; |
| Purcopal Place of Business Mailing Address 8503 S.W. 148 AVE. CIRCLE 8503 S.W. 148 AVE. CIRCLE | | | | | | | |
| MIAMI FL 3319 | | | II FL 33196 | | | | |
| 9 Denoised D | lace of Business | | Mailing Address | | Date Incorporated or Qualified 10/07/1985 FEI Number | 3a. Date of Last F 03/15/1996 | |
| 21 1091 | 9 MILET | RD 26 | 10912 WIL | es RD | 59-2593249 | No | oplied For ot Applicable |
| Suite, Apt. 22) | | 27 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | Fee Re | Additional equired |
| Oily & Stat 23 (0 R v | SPRINGS | | CORNIC SPR. | NUS, FL. | 6. Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| 7ip 24] 3307 | | S A 29 | A CONTRACTOR OF THE PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF TH | Country 30 US M | | Yes No | 199.032 |
| FLE | 9. Name and Addr SHER, ANDREW D. | ess of Current Registe | red Agent | 81 Name | 10. Name and Address of New R | egistered Agent | |
| 55 V | VESTON BEACH TE 300 | | | 82 Street Add | dress (P.O. Box Number is Not Accept | able) | } |
| | IT LAUDERDALE FL | 33326 | | 83 | | | |
| | | | | 84 City | Acceptable and the second seco | FL 85 Zip | Code |
| 11. Pursuant office or r agent La | to the provisions of Se registered agent, or bo im familiar with, and ac | ctions 607.0502 and 607 th, in the State of Florida cept the obligations of, (| 7.1508, Florida Statute Such change was ar Section 607.0505, Flor | s, the above named cou uthorized by the corpora ida Statutes. | rporation submits this statement for the ation's board of directors. I hereby acc | purpose of changing i ept the appointment as | ts registered registered |
| SIGNATURE | Superior Species protestina | ner of keigh throot solved and the IRs | applicable (NOTE | Flogistereif Agont signature requ | .ired when reinstating) | DATE | |
| 12. | A control of the contro | OFFICERS AND DIRECT | A STATE OF THE PROPERTY OF THE PARTY OF THE | 13. | ADDITIONS/CHANGES TO OFF | | |
| TRUE NAME | (PD Ruggiano, Mich | AFI | DELETE. | 1.1 TITLE 1.2 NAME | | ☐ Change | Addition 6 |
| STREET ADDRESS | 9725 N.W. 36 MAI | | | 1.3 STREET ADDRESS | | | C R Contribite C |
| OFY:ST W | CORAL SPRINGS | FL | | 1.4 CITY- ST- ZIP | | | |
| Trut | VD | | ☐ DELETE | 2.5 TILE | | L Change | LJ Addition O |
| NAMI STREET ADOLESS | RUGGIANO, SHEII 9725 N.W. 38 MAI | | | 2.2 NAME 2.3 STREET ADDRESS | | | } |
| City-St-2iF | CORAL SPRINGS | | | 2.4 CITY-ST-ZIP | | | Ì |
| lu.i | STD | | DELETE | 31 TITLE | | Change | Addition |
| N4ME | PEOPLES, ANITA | | | 3.2 NAME | | | \ |
| STREET ANDRESS | 9503 SW 148 AVE MIAMI FL | : CIR | | 3.3 STREET ADDRESS | | | } |
| _ (217) ST 70F ; = 1883 | MIAMI LE | | DELETE | 3.4 CITY-S1-ZIP 4.1 TITLE | | Change | Addition |
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| Stein Labbets | | | | 5.3 STREET ADDRESS | | | |
| CIY SV-ZIP | | | | 5.4 CITY-ST-ZIP | · | | |
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| NAME E HELL Abresi vo | | | | 6.2 NAME 6.3 STREET ADDRESS | | | } |
| ener CROPSESS | } | | | NO STREET MOURESS | | | } |

14. I do barely 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 in off their 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 Brack 12 or Block 13 if changed, grow an attachment with an address.

SIGNATURE: Michael Continued to the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brack 12 or Block 13 if changed, grow an attachment with an address.

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SIGNATURE: Michael Continued to the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes. I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the information required by Chapter 607, Florida Statutes, I further certify that the informati