

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUL 26 AM 10:15

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N97000000526

1. Corporation Name

THE SOUTH FLORIDA MERCEDES-BENZ
DEALERS, Inc

Principal Place of Business

Mailing Address

9696 NW 7th Ave
MIAMI, FLA 33150

(Same)

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

03/01/95

N/A

4. FEI Number

Applied For

65-0564083

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

10. Name and Address of New Registered Agent

81

Name

JAMES D. EVANS, Jr.

82

Street Address (P.O. Box Number is Not Acceptable)

THE SOUTH FLORIDA MERCEDES-BENZ DEALERS

83

9696 NW 7th Ave

84

City

MIAMI

FL

85

Zip Code

33150

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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

[Signature]
Signature typed or printed name of registered agent and file if applicable.

JAMES D. EVANS, Jr.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P/D

☐ DELETE

NAME

JAMES D. EVANS

STREET ADDRESS

9696 NW 7th Ave

CITY-ST-ZIP

MIAMI, FLA 33150

TITLE

V/D

☐ DELETE

NAME

ROBERT BROCKWAY

STREET ADDRESS

9696 NW 7th Ave

CITY-ST-ZIP

MIAMI, FLA 33150

TITLE

T/D

☐ DELETE

NAME

JAMES LINUS

STREET ADDRESS

9696 NW 7th Ave

CITY-ST-ZIP

MIAMI, FLA 33150

TITLE

S/D

☐ DELETE

NAME

RICHARD BASTON

STREET ADDRESS

9696 NW 7th Ave

CITY-ST-ZIP

MIAMI, FLA 33150

TITLE

AT/D

☐ DELETE

NAME

ROBERT KIRLAND

STREET ADDRESS

9696 NW 7th Ave

CITY-ST-ZIP

MIAMI, FLA 33150

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

☐ DELETE

CITY-ST-ZIP

☐ DELETE

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

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100001905741

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SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES D. EVANS Jr

Date

(305) 693-1711

Daytime Phone #

CR2E037 (3/96)