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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 30 1998 8:00am Secretary of State

MER	CEDES AUTO CENTER IN		3)		
'	ice of Business	Mailing Address			:: ve:d: 1:00; 0:::: 9191: 190: 190!
57 NW 36 ST MIAMI FL 33127		57 NW 36 ST Miami FL 33127			
US	VVIET	US		DO NOT WRITE IN TH	IS SPACE
•				3. Date Incorporated or Qualified	-
9 Principal	Place of Business	2a, Mailing Address		10/29/1992	
21		26		4. FEI Number	Applied For
Suite, Apt	I. #, etc.	Suite, Apt. #, etc.		65-0430344	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Obuntari	28		Trust Fund Contribution	Added to Fees
24 Zip	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the	
.27]	9, Name and Address of Cur		30	Personal Property Tax due June 30. 10. Name and Address of New Registere	
;	MESTAYER, MICHEL B5 NORTHWEST 38TH STREET MIAMI FL 33127 I to the provisions of Sections 607.0		83 84 City	dress (P.O. Box Number is Not Acceptable) From the purpose ation's board of directors. I hereby accept the a	B5 Zip Code of changing its registered
agent. I	am iamiliar with, and accept the ob	iligations of, Section 607.0505, F	authorized by the corporatorida Statutes. 18. Registered Agent signature requirements.		
12.		AND DIRECTORS	13.	uired when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	MESTAYER, MICHEL		1.2 NAME		
STREET ADDRESS	65 NORTHWEST 36TH ST	reet	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS			2 2 NAME		
CITY-ST-ZIP			2.3 STREET ADDRESS	S .	Í
TITLE		☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	•	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME OTREET ADDRESS			4.2 NAME		i
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 C(TY - ST - 7)P 5.1 TITLE		Change Addition
NAME			5.2 NAME		C Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	cartify that the information executed	with this tiling does not applied 6	6.4 CITY-ST-ZIP	Section 119.07(3)(i). Florida Statutes. I furiber	

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 trystee 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.

CICNATURE.