

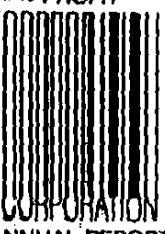

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PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Gordon M. Norrham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000008749 (2) ✓OK
1. Corporation Name
MIAMI AUTOLAND, INC.

Principal Place of Business: 3700 NW 3181 AVE. MIAMI FL 33142
Mailing Address: 3700 NW 3181 AVE. MIAMI FL 33142



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		28. Mailing Address		3. Date Incorporated or Qualified 02/03/1993	
11. Suite, Apt. #, etc.		29. Suite, Apt. #, etc.		4. FEI Number 65-0441483	
23. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25. Country		29. Country		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. Name and Address of Current Registered Agent
AGRACHOV, DIMITRY
1001 SW 156 AVE
PEMBROKE PINES FL 33027

19. Name and Address of New Registered Agent

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

FL 85. 7in Code

I, _____, 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: _____ (Signature of principal officer or registered agent and title as applicable) _____ (Name of Registered Agent signature required when resigning) _____ (Date)

18. OFFICERS AND DIRECTORS		19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
18.1 NAME	DP AGRACHOV, DIMITRY	19.1 TITLE	
18.2 STREET ADDRESS	1001 SW 156 AVE	19.2 NAME	
18.3 CITY - ST - ZIP	PEMBROKE PINES FL 33027	19.3 STREET ADDRESS	
18.4 FILE		19.4 CITY - ST - ZIP	
18.5 NAME	AGRACHOV, GREGORY	19.5 TITLE	
18.6 STREET ADDRESS	8814 S.W. 68TH AVE.	19.6 NAME	
18.7 CITY - ST - ZIP	COOPER CITY FL 33328	19.7 STREET ADDRESS	
18.8 FILE		19.8 CITY - ST - ZIP	
18.9 NAME		19.9 TITLE	
18.10 STREET ADDRESS		19.10 NAME	
18.11 CITY - ST - ZIP		19.11 STREET ADDRESS	
18.12 FILE		19.12 CITY - ST - ZIP	
18.13 NAME		19.13 TITLE	
18.14 STREET ADDRESS		19.14 NAME	
18.15 CITY - ST - ZIP		19.15 STREET ADDRESS	
18.16 FILE		19.16 CITY - ST - ZIP	
18.17 NAME		19.17 TITLE	
18.18 STREET ADDRESS		19.18 NAME	
18.19 CITY - ST - ZIP		19.19 STREET ADDRESS	
18.20 FILE		19.20 CITY - ST - ZIP	

I hereby certify that the information indicated on this annual report or other 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; and that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable.

SIGNATURE: _____
President 4/30/99

CR2003A (10/97)