FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000012243	(0)
4 Corporation Name		• •

Corporation Name

VEHICLS INVESTMENTS INC

TLONG										
Principal Place 1957 71 ST. MIAMI BEACI US		Mailing Address 1957 71 ST. MIAMI BEACH FL 331 US	41							
•						3.	Date Incorporated or Qualified 02/10/1993		e of Last R 4/27/19	
2. Principal Pla 21	ace of Business	2a. Mailing Address 26				4.	FEI Number 65-0389641			Applied For Not Applicable
Suite, Apt. #	#, etc.	Suite, Apl. #, etc.				5.	Certificate of Status Desired	D		Additional Required
City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
Zip 24]	Country 25	Zip [29]	30 Co	untry				□No		199.032,
	9. Name and Address of Currer	nt Registered Agent		81	Name	10.	Name and Address of New F	legistered	Agent	
	HOI SANG	STREET		82	Street A	.ddress (P	.O. Box Number is Not Acceptab	ole)		
MIAMI B	BEACH FL 33139 MI AM I	BEACH		83			, and the property of the second court of the second in the second court of the second			
	FLA	33141		84	City		The state of the s		85 Z ₁	p Code
familiar wit SIGNATURE	to the provisions of Sections 607,0502 ed agent, or both, in the State of Flori th, and accept the obligations of Sect Symbox, by ed a provenance of registered by all	ion 607.0505, Florida Statute	ites, the ab zed by the is.					rpose of ch ointment as	anging its i s registered	egistered office Lagent. Lam
12.		D DIRECTORS	13.		3 9 60 115 10	april Do to Rollin	ADDITIONS/CHANGES TO OFF		DIPHECTO	PRS IN 12
TITLE	D	[] DELETE	1.1	TITLE					Change	Addition
NAME	YEUNG, HOI SANG 1957 71 ST.			IAME						
STREET ADDRESS CITY-ST-ZIP	MIAMI BEACH FL			STREET. STY-ST	ADDRESS					
TITLE		["] DELETE		ant-si Muf	-21r				[] Change	(Addition
NAME			221	NAME						
STREET ADDRESS			238	STREET.	ADDRESS					
C11Y-S1-7iP				UIY-SI	I-ZIF					PO 1
TITLE		DEFEAT		TITLE					Change	Addition
NAME STREET ADDRESS				VAME Street	ADDRESS					
CITY-\$1-ZIP			1	SINCES SILY-SI						
THLE		DELETE		TITLE			A control of an experience and an experience		Change	Addition
NAME			4.21	JAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		[] DELETE	** ***	OIY-SI	- Z -P				Change	[] åddition
11TLE NAME		L''I percit		TIBLE NAME					Change	Addition
STREET ADDRESS					ADDRESS					
CITY-S1-7IP				3174-S1						
TILE		DCLFTE		TITLE	,514 - -				Change	Add-tion
NAME			621	NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

9/23/96 305-867-8999