

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Morikoff
Secretary of State
CIVIL SERVICE CENTER, Rm. 420

DOCUMENT # P93000016539 (7)

1. Incorporated Under:

WESTLAND AUTO SALES INC.

50 MAY - 11 AM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
4015 W 16TH AVE HALEAH FL 33012 US	4015 W 16TH AVE HALEAH FL 33012 US

3. Date Incorporated or Qualified 03/04/1993	3a. Date of Last Report 01/27/1994
4. FTT Number 65-0395008	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 190.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Type of Business	2a. Mailing Address
21	25
State Apt # etc	State Apt # etc
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country
25	30

9. Name and Address of Current Registered Agent

**ARANGO, EMILIO
4250 SW 4TH ST
MIAMI FL 33134**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. 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 _____

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ARANGO, EMILIO
STREET ADDRESS	4250 SW 4TH ST
CITY, ST, ZIP	MIAMI FL 33134
TITLE	DV
NAME	ARANGO, MIGUEL
STREET ADDRESS	1470 W 41 STR, #312
CITY, ST, ZIP	HALEAH FL
TITLE	DS
NAME	ARANGO, VIVANA
STREET ADDRESS	1470 W 41 STR, #312
CITY, ST, ZIP	HALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I solemnly swear that the information supplied with this filing is substantially true and correct and that the information stated in law book 1991 (27) (8), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person. I certify that this certificate is a true and correct copy of the original and that the name or names of the persons named herein are the persons named in the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or as an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

3/28/95 (305)-833-8586
Sylvia Brown