FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
1995 JAN 25 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000017486 (0)

1. Corporation Name
JOEY'S AUTO BROKERS, INC.

Principal Place of Business	Mailing Address
1501 NORTH STATE ROAD 7 HOLLYWOOD FL 33021	1501 NORTH STATE ROAD 7 HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/03/1993
3a. Date of Last Report: 01/28/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 65-0391153 ☐ Applied For ☐ 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

9. Name and Address of Current Registered Agent

EDELSBERG, JOEY
ONE TURNBERRY PLACE
19495 BISCAYNE BLVD. SUITE 606
NORTH MIAMI BEACH FL 33180-2320

10. Name and Address of New Registered Agent

81 Name: Edelsberg, Joey
82 Street Address (P.O. Box Number is Not Acceptable)
83: 21385 Marina Cove Cr. #E13
84 City: Aventura FL 85 Zip Code: 33180

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 _____ DATE: Jan-18,1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	EDELSBERG, JOEY	1.2 NAME	KRISTEN EDELSBERG	
STREET ADDRESS	1501 N. STATE ROAD 7	1.3 STREET ADDRESS	21385 MARINA COVE CR. #E13	
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		2.1 TITLE	TREASURER	☐ Change ☒ Addition
NAME		2.2 NAME	JOEY EDELSBERG	
STREET ADDRESS		2.3 STREET ADDRESS	1501 N. STATE ROAD 7	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	HOLLYWOOD, FL 33021	
TITLE		3.1 TITLE	SECRETARY	☐ Change ☒ Addition
NAME		3.2 NAME	KRISTEN EDELSBERG	
STREET ADDRESS		3.3 STREET ADDRESS	21385 MARINA COVE CR. #E13	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		SCU-26-75

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)(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 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 addition.

SIGNATURE: _____ Jan. 18, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date (Optional)

0098117 CP