PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000024337 Corporation Name

MAC AUTO CORP.

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90016 010 ***150.00



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Principal Place of Business Mailing Address					-{	TYLD IT DIE DEG al if	188 (11);1 1001 1881
3881SW 130TH AVE. MIAMI FL 33175		3881 SW 130TH AVE. MIAMI FL 33175 US		DO NOT WRITE IN T	HIS SPACE		
					3. Date incorporated or Qualifed		
					04/01/1993		
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied Fo		
21	26			00 0030030		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e					5. Certificate of Status Desired	·	5 Additional Required
		27			<u> </u>		
City & State Ci					6, Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country 25	Zip 30	Country	•	This corporation owes the current year Personal Property Tax.	r Intangible Yes	□No
24	9. Name and Address of Curren				10. Name and Address of New Register	ed Agent	
	S. Hallio Bild Addieso O. Colifer	T. I. Consistence of Same	81	Name			
Cazanas, virgilio f					(D.O. Day Mysters in Net Assentable)		
4434 SW 74 STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33155			83	<u> </u>			
						105 7	i- Codo
		_	84	City	F	=L 85 Zi	ip Code
11 Pursuant 1	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, th	e abov	e-named corpo	pration submits this statement for the purpose	of changing	its registered_
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 of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
	m ramiliar with, and accept the obliga	mons of occurry out to so, i follow	J	•			
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable. (NOTE: Regis	tered Agei	nt signature required	when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE 1	I.1 TITLE			Chang	ge 🗀 Addition
NAME	CAZANAS, MARCO A	ANAS, MARCO A 12N					
STREET ADDRESS	0007 077 100 777 21702		I.3 STREE	TADDRESS)
CITY-ST-ZIP	MIAMI FL 33175		I.4 CITY-S	T-ZIP			
TITLE	D	☐ DELETE 2	2.1 TITLE			☐ Chanç	ge Addition
NAME	OZZAWIO, VIIGIEIO I		2.2 NAME		•		ĺ
STREET ADDRESS	3881 SW 130 AVENUE		2.3 STREE	TADORESS	•	1	
CITY-ST-ZIP			2. 4 CITY-5	ST-ZIP		- Chan	ge Addition
TITLE		-	3.1 TITLE			☐ Chang	je 🗆 Addition
NAME	•	l	3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		☐ Chang	ge Addition
TITLE		-	I.1 TITLE	-		[_] Online	,
NAME		L f	1. 2 NAME				Ţ
STREET ADDRESS	1	•		TADDRESS			
CITY-ST-ZIP	416-2-1		1.4 CITY-S	T-ZIP		☐ Chang	ge Addition
TITLE			5.1 TITLE 5.2 NAME				,
NAME		•		T ADDRESS			
STREET ADORESS			5.4 CITY+S				
CITY-ST-ZIP			5.4 CITTLE			☐ Chanç	ge Addition
TITLE			3.2 NAME				<i>'</i>
NAME				T ADORESS			(
STREET ADDRESS		ľ	J.J OIREE	, ALONLOS			

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 frue 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

SIGNATURE: >