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

PRCFIT CORPORATION ANNUAL REPORT



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

1996

101

| DOCUMENT # P93000025921 (6) 1. Corporation Name QUERO BODY SHOP & USED AUTO PARTS, INC. Principal Place of Business 2630 N.W. 119TH ST. 2630 N.W. 119TH ST. | | | | | | |
|---|---|--|------------------|------------------------------------|---|---|
| MIAMI FL 330 | MIAMI FL 33054 | | | | | |
| | | | | | 3. Date Incorporated or Qualified 04/05/1993 | 3a. Date of Last Report 09/15/1995 |
| 2. Principal Place of Business | | 2a. Mailing Address 26 | | 4. FEI Number 65-0404037 | Applied For Not Applicable | |
| Surte, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zφ | Country | Zip | Cou | ntry | 8. This corporation has liability for | |
| 24 | 9. Name and Address of Curre | 29 | 30 | | Florida Statutes Yes 10. Name and Address of New F | MNo |
| | g. Halle Blo Address of Colle | nt Hogistatoo Agont | | 81 Name | 10. 110.110 0.110 1.100 0.110 1.110 1.11 | |
| QUERO, RICARDO 2630 N.W. 119TH ST. MIAMI FL 33054 | | | | 82 Street Addr 83 Street Addr | ess (P.O. Box Number is Not Acceptat | 85 7in Code |
| or registere familiar wit | o the provisions of Sections 607.05(ed agent, or both, in the State of Flo h, and accept the obligations of, Se Signatur, back or philed name of registered age | rida. Such change was authoriz ction 607.0505, Florida Statutes | ed by the d | ve-named corpor corporation's boar | ation submits this statement for the purd of directors. I hereby accept the app | rpose of changing its registered office contrnent as registered agent. I am |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| TITLE NAME | PTSD QUERO, RICARDO 2630 N.W. 119TH ST. | □ DELET€. | 1. 1 T 1.2 N/ | M E | | ☐ Change ☐ Addition |
| STREET ADDRESS | MIAMI FL 33054 | | | REET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | 2 1 T | TY-ST-ZIP TLE | | Change Addition |
| NAME | | | 2.2 N | • | | |
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| CITY - ST - ZIP | | | 2.4 0 | TY-ST-ZIP | | |
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| STREET ADDRESS | | | 3 3. S | ireei address | | |
| CITY - ST - ZIP | | | 3.4 C | TY-ST-ZIP | | |
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| TITLE | | DELETE | 5. 1 T | | | Change Addition |
| NAME | | | 5.2 N | | | |
| STREET ADDRESS | | | | IREET ADDRESS | | |
| CITY-ST-ZIP | | C) DOLLE | | TY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE NAME | | ☐ DELETE | 6.2 N | | | El change El Kodillon |

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 eport 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 on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

Cayling Proce

Cayling

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

STREET ADDRESS

4/23/96 305-687.5845