FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000052830 (5)

SHARP DEAL AUTOMOBILES CORPORATION

Principal Place 3095 OKEEC HIALEAH FL US 2. Principal P 21 Suite, Apt.	HOSEE RD 33012	Mailing Address 3095 OKEEHOBEE RD HIALEAH FL 33012 US 2a, Mailing Address 26 Suite, Apt. #, etc.			DO NOT WRITE IN T 3. Date Incorporated or Qualified 07/28/1993 4. FEI Number 65-0442596 5. Certificate of Status Desired	
City & State		27				Fee Required
23 City & Stat	θ	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cour	itry	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
ļ <u> </u>	g. Name and Address of Curre	nt Registered Agent		241	10. Name and Address of New Register	red Agent
	ONDA, RICHARD F		ľ	B1 Name		
12501 N KENDALL DR			[-	Street Add	ress (P.O. Box Number is Not Acceptable)	
i Mi	AMI FL 33183		<u></u>	83		
l			Ĺ			
			1	B4 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 Signature, typod or printed name of registered agent and their applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
12.	PD	DELETE	13.	.E	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	SRUR, MIGUEL OSCAR		1.2 NA	AE		
STREET ADDRESS	12501 N. KENDALL DR.		1.3 STF	EET ADDRESS		\ <u>{</u>
CITY-ST-ZIP	MIAMI FL 33186		1.4 C(T	Y-ST-71P		<u></u>
TITLE	\$D	☐ DELETÉ	2.1 TITL	ì		Change Addition C
NAME	\$RUR, JUAN ROLANDO		2.2 NA	·		
STREET ADDRESS	12501 N. KENDALL DR.			EET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33186	DELETE	2. 4 CfT 3.1 TiTL	Y-SI-ZIP		☐ Change ☐ Addition
NAME		beater	3.2 NAI			C Orange C Redution
STREET ADDRESS				EET ADDRESS	•	1
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	4.1 TITL			☐ Change ☐ Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-S1-ZIP		
TITLE		☐ DELETE	5.1 1111			Change Addition
NAME			5.2 NA	ì		1
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CIT	r-ST-ZIP		Change Addition
I STILE		PECCE	■ D 1 HHL			C criange Manifold

14. I hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.

62 NAME 63 STREET ADDRESS

TITLE NAME

STREET ADDRESS