

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000075314 (3)

1. Corporation Name

AL-HARBI AUTO SALES, INC.

Principal Place of Business

Mailing Address

8320 E. COLONIAL DRIVE
ORLANDO FL 32817

8320 E. COLONIAL DRIVE
ORLANDO FL 32817-3910

FILED

97 APR 29 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/25/1993		01/13/1997	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		59-3208496		Not Applicable	
24 Country		29 Country		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				10. Name and Address of New Registered Agent			
WILLIAMS, KIMBERLY A 8320 E. COLONIAL DRIVE ORLANDO FL 32817				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 <u>HUSSEIN</u>				DATE <u>3-10-97</u>			
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE <input type="checkbox"/> DELETE				1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME AL-HARBI, HUSSEIN				800002172278			
STREET ADDRESS C/O 8312 EAST COLONIAL DRIVE				-05/08/97--01158--001			
CITY-ST-ZIP ORLANDO FL 32817				*****165.00 *****165.00			
2.1 TITLE <input type="checkbox"/> DELETE				2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME AL-HARBI, HUSSEIN				800002172278			
STREET ADDRESS C/O 8312 EAST COLONIAL DRIVE				-05/08/97--01158--002			
CITY-ST-ZIP ORLANDO FL 32817				*****8.75 *****8.75			
3.1 TITLE <input type="checkbox"/> DELETE				3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
STREET ADDRESS				4.2 NAME			
CITY-ST-ZIP				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
5.1 TITLE <input type="checkbox"/> DELETE				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
6.1 TITLE <input type="checkbox"/> DELETE				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 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 address.

SIGNATURE:

HUSSEIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0000014

CR2E034 (9/96)