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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000084862 (0)

CARS R US SALES, INC.

FILED May 05 1998 8:00am Secretary of State



Frincipal Flace	Orbusiness	Maning Address						
3340 NW 36TH	. *	3340 NW 36TH ST.						
MIAMI FL 3314 US	16	MIAMI FL 33142 US			DO NOT WRITE IN THIS SPACE			
US		00			3. Date Incorporated or Qualified			
					12/13/1993			
2. Principal Place of Business 2a. Mailing Address							Applied For	
			DIVID UNV		· ·	65-0456990 Not Applied 1		
		Suite, Apt. #, etc	6901 S. DIXIE HWY.			SR 75 Additional		
22	_	27		5. Certificate of Status Desired Fee Required				
City & State		City & State			6. Election Campaign Financing	\$5.	00 May Be	
MIAMI, FLORIDA		MIAMI, FLORIDA		Trust Fund Contribution				
Zip	Country				8. This corporation owes or has paid the current year Intangible			
24 33157				DADE	Personal Property Tax due June 30. 🔀 Yes 🔲 No			
	9. Name and Address of Currer	it Registered Agent			10. Name and Address of New Registere	J Agent		
NIC	OLAS MENDIZABAL JR.		8	Name				
16025 S.W. 147 CT.				2 Street Add	doress (P.O. Box Number is Not Acceptable)			
MIA		104		Office (Model Safet, O. Box Hamber 13 140(Model table)				
			8	3				
				4 City		Teel :	Zip Code	
			٥	4 City	F	L 85 ²	zip Code	
SIGNATURE _	n familiar with, and accept the oblig							
	Signature, typed or portion name of registered age			tgent signature requ	Hed when reinstating) DATE	D DIDEO:	TORC IN 10	
12.	OFFICERS AN	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AT	Chan		
TITLE	PSTD	☐ Detere	1.1 1lfLl			Chan	ige Addition	
NAME	NICOLAS MENDIZABAL		1.2 NAM					
STREET ADDRESS			1.3 STREET ADORESS					
CITY-ST-ZIP	MIAMI FL	T OF STE		- ST- ZIP				
TITLE	V	DFLETE	2.1 11716	ì		∐ Chan	nge L Addition	
NAME	GARCIA, ELOY J		2.2 NAM					
STREET ADDRESS	9910 SW 147 ST		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL			/-ST-ZIP		T		
TITLE	DELETÉ		3.1 TITLE	Į.		☐ Chan	nge	
NAME			3.2 NAM					
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		'-S1-ZIP				
TITLE		DELETE	4.1 11116			L Chan	nge	
NAME			4. 2 NAN	ME)				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP				-\$1 - ZIP		——————————————————————————————————————		
TITLE		☐ DELET E	5.1 TITLE			☐ Chan	nge L Addition	
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STRE	ET ADORESS				
CITY-ST-ZIP			5.4 CITY	-ST-ZIP				
TITLE		☐ DELETE	6.1 TITE			☐ Chan	nge 🔲 Addition	
NAME			6.2 NAM	E				
STREET ADDRESS			63 STRE	E1 ADDRESS				
CITY-ST-ZIP	Æ		64 CITY	-ST-P				
14. I hereby co	ertify that the information supplied w	ith this filing does not quality	d the exem	ption stated r	Section 119.07(3)(i), Florida Statutes. I further	certify that	the information	
officer or d	on this annual report or surplicments firector of the comporation of the recurrences.	d annual relicit is true and acc even or trusien empowered to covern with the address	execute thi	ma, my signali s report as req	ure shall have the same legal effect as if made u quired by Chapter 607, Florida Statutes; and tha	irioer oath I my name	; macram an appears in	