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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZIP

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P9400002375 (1)

LA ESPERANZA JUNK, USED AUTO PARTS, CORP.

Principal Place of Business Mailing Address 12760 CAIRO LN 12780 CAIRO LN OPALOCKA FL 33054 OPALOCKA FL 33054-4611 3. Date Incorporated or Qualified 3a. Date of Last Report 01/11/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 21 65-0458982 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country $Z_{\rm IP}$ Country Zip This corporation has liability for intangible tax under s. 199.032, Florida Statutes Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ. NIVALDO 12760 CAIRO LN 82 Street Address (P.O. Box Number is Not Acceptable) OPALOCKA FL 33054 83 84 City Zip Code 85 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 typed or priored harve of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change Addition 111111 THLE HERNANDEZ, NIVALDO 12 NAME 6590 W 24 CT #102 STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33016 1.4 CITY-ST-ZIP CITY-ST-2II DELETE ☐ Change Addition muf 2.1 TITLE HERNANDEZ, JUDITH 22 NAME NAME 6590 W 24 CT #102 STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33016 2. 4 CITY-ST-ZIP CiTY - ST - ZIP DELETE Change Addition THEE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. C/TY - ST - ZIP CITY-\$1-742 DELETE Change Addition 4.1 TITLE DIDE 4. 2 NAME NAM 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - 7IP 4.4 CITY-ST-ZIP DELETE Change Addition Title 5.1 TITLE 5.2 NAME NAM 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Addition Change DHE 6 1 TITLE 6.2 NAME NAM. 63 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do 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

SERVED TUDITH HERNANDEZ 4/30/97 (305) 681-2134

an attachment with an address.