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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P9400003057

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90201 046 ***150.00

FOX AUT	TOMOTIVE, INC.			
Principal Place	of Business	Mailing Address		T (COTE EQUATION TO THE FORM TO THE FORM THE FO
19226 W DIXIE HWY NORTH MIAMI BEACH FL 33180 US 19226 W D HWY NORTH MIAMI BEACH FL 331 US US			80	DO NOT WRITE IN THIS SPACE
į				3. Date Incorporated or Qualifed
2.0	f Dunitary	2a. Mailing Address		01/05/1994 4. FEI Number Applied For
⊢ • • • • • • • • • • • • • • • • • • •		-		
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.		26 Suite Ant # etc		65-0461575 Not Applicable \$8.75 Additional
22 27			5. Certificate of Status Desired Fee Required	
City & State City & State			6. Election Campaign Financing \$5.00 May Be	
23 28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29	0	Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
FOX, DIANE 10801 SW 57 PL			81 Name	
			82 Street A	Address (P.O. Box Number is Not Acceptable)
FT L	AUDERDALE FL 33328		83	
			84 City	85 Zip Code
				FL S E S C C
office or r	enistered agent, or both, in the State o	f Florida. Such chance was auth	norized by the corboi	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statutes.	}
SIGNATURE			egistered Agent signature re	equired when reinstating) DATE
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDST	☐ DELETE	1.1 TITLE	Change Addition
NAME	FOX, DIANE		1,2 NAME	Stove Fox
STREET ADDRESS	10801 SW 57 PLACE		1,3 STREET ADDRESS	Steve Fox 108015W 57th place Ft-LAUDERDALE, Fl 33328
CITY-ST-ZIP	FT. LAUDERDALE FL 33328		1.4 CITY-ST-ZIP	Ft. LAW Derdale, Fl 33328
TITLE	TT. DIODETTE GOOD	☐ DELETE	2.1 TITLE	Change Addition
NAME	!		2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	· ·
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	<u> </u>
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4, 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ ĐELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			53 STREET ADDRESS	٠.
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	·
STREET ADDRESS			6.3 STREET ADDRESS	
			6.4 CITY-ST-ZIP	

14. I 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 suppliemental 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 comporation or the receiver or trastee 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, with all other like empowered.

SIGNATURE: