

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000017631

1. Corporation Name

MIKE'S ~~AUTO~~ MARINE SALES & SERVICE, INC.
AUTO

Principal Place of Business

17201 BISCAYNE BLVD.
N. MIAMI BEACH FL 33160

Mailing Address

17201 BISCAYNE BLVD.
N. MIAMI BEACH FL 33160

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90148 005 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1994

4. FEI Number

65-0551804

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 13301 Biscayne Blvd

2a. Mailing Address

26 13301 Biscayne Blvd

Suite, Apt. #, etc.

22 105

Suite, Apt. #, etc.

27 105

City & State

23 North Miami, FL

City & State

28 North Miami, FL

Zip

24 33181

Country

25 Dade

Zip

29 33181

Country

30 Dade

9. Name and Address of Current Registered Agent

JIMENEZ, ERNEST M
17201 BISCAYNE BLVD.
N. MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 13301 Biscayne Blvd 105
North Miami, FL

84 City

FL

85 Zip Code

33181

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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME JIMENEZ, ERNEST M
STREET ADDRESS 17201 BISCAYNE BLVD.
CITY-ST-ZIP N. MIAMI BEACH FL 33160

TITLE V ☐ DELETE

NAME JIMENEZ, CARMELINA
STREET ADDRESS 17201 BISCAYNE BLVD
CITY-ST-ZIP N. MIAMI BEACH FL 33160

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE same ☒ Change ☐ Addition

1.2 NAME same

1.3 STREET ADDRESS 13301 Biscayne Blvd 105

1.4 CITY-ST-ZIP North Miami, FL 33181 ☒ Change ☐ Addition

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 13301 Biscayne Blvd 105

2.4 CITY-ST-ZIP North Miami, FL 33181 ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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, with all other like empowered.

SIGNATURE:

Carmelina Jimenez
Carmelina Jimenez

4/19/99 305-940-1352
Date Daytime Phone #