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FILED  
Feb 18 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000017804 (3)

1. Corporation Name  
INFINITI OF BROWARD, INC.

Principal Place of Business

~~551 G. MILITARY TRAIL~~  
~~WEST PALM BEACH FL 33415~~  
~~406~~

Mailing Address

~~551 G. MILITARY TRAIL~~  
~~WEST PALM BEACH FL 33415~~  
~~406~~

2. Principal Place of Business

21 4524 GUN CLUB ROAD

Suite, Apt. #, etc.

22 SUITE 101

City & State

23 WEST PALM BEACH, FL

Zip

33415

Country

USA

2a. Mailing Address

26 4524 GUN CLUB ROAD

Suite, Apt. #, etc.

27 SUITE 101

City & State

28 WEST PALM BEACH, FL.

Zip

33415

Country

USA

9. Name and Address of Current Registered Agent

THOMPSON, DOUGLAS E.  
4524 GUN CLUB ROAD  
SUITE 101  
WEST PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1994

4. FEI Number

65-0472328

Applied For  
Not Applicable

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 owes or has paid the current year intangible  
Personal Property Tax due June 30.



Yes



No

10. Name and Address of New Registered Agent

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

*[Signature]*

DOUGLAS E. THOMPSON

01/28/98

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 ☐ DELETE

NAME DP  
STALUPPI, JOHN  
STREET ADDRESS ~~551 G. MILITARY TRAIL~~  
CITY - ST - ZIP ~~WEST PALM BEACH FL~~

TITLE ☐ DELETE

NAME S  
STALUPPI, JEANETTE  
STREET ADDRESS ~~551 G. MILITARY TRAIL~~  
CITY - ST - ZIP ~~WEST PALM BEACH FL~~

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 ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 4524 GUN CLUB RD STE 101  
1.4 CITY - ST - ZIP WEST PALM BEACH, FL. 33415

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS 4524 GUN CLUB RD STE 101  
2.4 CITY - ST - ZIP WEST PALM BEACH, FL. 33415

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
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 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 amendment with an address

SIGNATURE:

*[Signature]*

JOHN STALUPPI,  
PRESIDENT

01/28/98 (561) 680-0550

CR2E034 (10/97)