

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

FILED

99 FEB -9 PM 4:21

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 994000038104

1. Corporation Name
CORAL WAY AUTO SERVICES, INC.

Principal Place of Business Mailing Address
**1290 Coral Way
 Miami, Florida 33145**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/20/1994

4. FEI Number
65-0494294

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 the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent
**Patrick F. Franey
 19090 SW 197 Avenue
 Miami, Florida 33187**

10. Name and Address of New Registered Agent

81 Name **Marcos M. Iduate**

82 Street Address (P.O. Box Number is Not Acceptable)
1290 Coral Way

83

84 City **Miami** FL 85 Zip Code **33145**

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 **MARCOS M. IDUATE** DATE **2/8/99**

12. OFFICERS AND DIRECTORS

TITLE DELETE
President/Director
 NAME **Patrick F. Franey**
 STREET ADDRESS **19090 SW 197 Avenue**
 CITY-ST-ZIP **Miami, Florida 33187**

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
President/Director
 1.2 NAME **Marcos M. Iduate**
 1.3 STREET ADDRESS **501 SW 99 Avenue**
 1.4 CITY-ST-ZIP **Miami, Florida**

2.1 TITLE Change Addition
Secretary/Director/Treasurer
 2.2 NAME **Leonor R. Iduate**
 2.3 STREET ADDRESS **501 SW 99 Avenue**
 2.4 CITY-ST-ZIP **Miami, Florida**

3.1 TITLE Change Addition

3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
600002773226--G
02/11/99-01074-013
*****150.00 ***150.00**

4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
600002773226--G
02/11/99-01074-014
*****17.50 ***17.50**

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 attachment with an address, with all other like empowered.

SIGNATURE: **Marcos M. Iduate**, President

DATE **2/8/99** DAYTIME PHONE # **305-854-3344**

AD
2/9