

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:44

DOCUMENT # P94000045441 (0)

1. Corporation Name

CRUZ AUTO SALES, INC.

Principal Place of Business

3101 N.W. 36TH ST.
MIAMI FL 33142

Mailing Address

3101 N.W. 36TH ST.
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/17/1994

3a. Date of Last Report

2. Principal Place of Business

21 2691 NW 31st

2b. Mailing Address

26 2691 NW 31st

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami FL

28 Miami FL

Zip

Country

Zip

Country

24 33142

25 None

29 3

30

4. FEI Number

65-0502164

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CRTUZ, JOSE
3101 N.W. 36TH ST.
MIAMI FL 33142

10. Name and Address of New Registered Agent

81 Name

Cruz Jose

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

2691 NW 31st

83

84 City

Miami

FL

85 Zip Code

33142

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 firm if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CRUZ, JOSE
STREET ADDRESS	3101 N.W. 36TH ST.
CITY - ST - ZIP	MIAMI FL 33142
TITLE	D
NAME	SIDDIQI, IOBAL
STREET ADDRESS	3101 N.W. 36TH ST.
CITY - ST - ZIP	MIAMI FL 33142
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change ☒ Addition ☐
1.2 NAME	Cruz Jose
1.3 STREET ADDRESS	2691 NW 31st
1.4 CITY - ST - ZIP	Miami FL 33142
2.1 TITLE	Change ☒ Addition ☐
2.2 NAME	SIDDIQI, IOBAL
2.3 STREET ADDRESS	2691 NW 31st
2.4 CITY - ST - ZIP	Miami FL 33142
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Printed