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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000062920 (1)
1. Corporation Name

AUTO BECKER, INC.

AUTO BECKER, INC.

Principal Place of Business

Mailing Address



4726 SW 74TH AVENUE Miami FL 33155		4726 SW 74TH AVENUE MIAMI FL 33155					
					3. Date Incorporated or Qualified 08/25/1994	3a. Date of 1	Last Report 4/1995
	Sw 74 P	2a. Mailing Address 26 4726 \$ 0	v 74	2 Au	4. FEI Number 65-0512525		Applied For Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	_ \$	8.75 Additional Fee Required
23 Cilyn State		City A State	FL		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
<u> 24</u> 331	3315C 25 Country 29 33 15C 3						nder s. 199.032,
	9. Name and Address of Curre	nt Registered Agent		·	10. Name and Address of New R	egistered Age	nt
			81	Name			
SMYLER, HENRY I 9200 SO. DADELAND BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)			
STE. 520 MIAMI FI	0		83				
MILESTER I I	L 33130		84	City		FI 8	5 Zip Code
11. Pursuant to	o the provisions of Sections 607,050;	2 and 607.1508, Florida Statutes	, the above-r	amed corpo	ration submits this statement for the purp	pose of changin	ng its registered office
familiar wit	h, and accept the obligations of, Sec	tion 607.0505, Florida Statutes.	a by the corp	oration's boa	and of directors. I hereby accept the appo	ointment as regi	stered agent. I am
SIGNATURE _							
12.	Signature, typed or printed name of registered agon OFFICERS AN	Land title if applicable (NOTE ID DIRECTORS	:: Registered Ager	t signature require	ADDITIONS (CHANGES TO CEE	DATE	EOTODO IN 40
TITLE	D	□ DELETE	1. 1 TITLE		ADDITIONS/CHANGES TO OFF	CERS AND DIR	
NAME	SOTO, AGRIPINO	_	1.2 NAME				arigo [] Addition
STREET ADDRESS	4726 SW 74TH AVENUE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY - S	1			
TITLE	4	TO TELE	2 1 TITLE			☐ Cr	nange Addition
NAME	AGUILAR, YURY		2.2 NAME				• 🚨
STREET ADDRESS	4726 SW 74TH AVENUE		2 3 STREET	ADDRESS			·
CITY-ST-ZIP	MIAMI FL 33155		2.4 CHY-S	T-ZIP			
TULE		☐ DELETE	3 1 TITLE			☐ Cr	nange Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STREET	ADDRESS			
CHY ST-ZIP			3.4 CHY-S	T - Z IP			
TRILE		☐ DELETE	4.1 TITLE			☐ Ch	ange 🔲 Addition
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREE1	ADDRESS			
CHY-ST-ZIP			4.4 CITY - 5	I-ZIP			
TITLE		DELETE	5. 1 TITLE			☐ Cn	ange 🔲 Addition
			5.2 NAME				
NAMé							
			5 3 STREET	ADDRESS			
STREET ADDRESS CITY-ST-ZIP			5 3 STREET 5 4 CITY - S				
STREET ADDRESS CITY-ST-ZIP		☐ DELETE				☐ Ch	ange 🔲 Addition
STREET ADDRESS CITY - ST - ZIP TITLE		☐ DELÉTE	54 CITY-S			☐ Ch	range
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	54 CITY-S 6 1 TITLE	-7IP		☐ Ch	eange Addition

14. To helescy certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119,07(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

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Agripino Sub 04/05/96 (307) 265-9994