

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

FILED

May 07 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 # <u>P940006.65533</u> 1. Corporation Name <u>Florida State Certified Auto Re- Inspection Center, Inc.</u>			
Principal Place of Business <u>3141 NW 40 ST. MIAMI, FL. 33142</u>		Mailing Address <u>3141 NW 40 ST. MIAMI, FL. 33142</u>	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 <u>33193</u>		2a. Mailing Address 26 <u>15437 SW 68 LN.</u> 27 Suite, Apt. #, etc. 28 City & State 29 <u>MIAMI, FL. 33193</u> 30 Zip 31 <u>33193</u>	
3. Date Incorporated or Qualified <u>9-7-94</u>		4. FEI Number <u>65-0654883</u>	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent <u>ANA M. ALFONSO 15437 SW 68 LN. MIAMI, FL. 33193</u>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code <u>FL</u>	
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 provisions of, Section 607.0505, Florida Statutes. SIGNATURE <u>Armando Alfonso</u> DATE <u>4-29-98</u> (Not a Registered Agent Signature required when reappointing)			
12. OFFICERS AND DIRECTORS 12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP 12.5 TITLE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY-ST-ZIP 12.9 TITLE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-ST-ZIP 12.13 TITLE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-ST-ZIP 12.17 TITLE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-ST-ZIP 12.21 TITLE 12.22 NAME 12.23 STREET ADDRESS 12.24 CITY-ST-ZIP 12.25 TITLE 12.26 NAME 12.27 STREET ADDRESS 12.28 CITY-ST-ZIP 12.29 TITLE 12.30 NAME 12.31 STREET ADDRESS 12.32 CITY-ST-ZIP 12.33 TITLE 12.34 NAME 12.35 STREET ADDRESS 12.36 CITY-ST-ZIP 12.37 TITLE 12.38 NAME 12.39 STREET ADDRESS 12.40 CITY-ST-ZIP 12.41 TITLE 12.42 NAME 12.43 STREET ADDRESS 12.44 CITY-ST-ZIP 12.45 TITLE 12.46 NAME 12.47 STREET ADDRESS 12.48 CITY-ST-ZIP 12.49 TITLE 12.50 NAME 12.51 STREET ADDRESS 12.52 CITY-ST-ZIP 12.53 TITLE 12.54 NAME 12.55 STREET ADDRESS 12.56 CITY-ST-ZIP 12.57 TITLE 12.58 NAME 12.59 STREET ADDRESS 12.60 CITY-ST-ZIP 12.61 TITLE 12.62 NAME 12.63 STREET ADDRESS 12.64 CITY-ST-ZIP 12.65 TITLE 12.66 NAME 12.67 STREET ADDRESS 12.68 CITY-ST-ZIP 12.69 TITLE 12.70 NAME 12.71 STREET ADDRESS 12.72 CITY-ST-ZIP 12.73 TITLE 12.74 NAME 12.75 STREET ADDRESS 12.76 CITY-ST-ZIP 12.77 TITLE 12.78 NAME 12.79 STREET ADDRESS 12.80 CITY-ST-ZIP 12.81 TITLE 12.82 NAME 12.83 STREET ADDRESS 12.84 CITY-ST-ZIP 12.85 TITLE 12.86 NAME 12.87 STREET ADDRESS 12.88 CITY-ST-ZIP 12.89 TITLE 12.90 NAME 12.91 STREET ADDRESS 12.92 CITY-ST-ZIP 12.93 TITLE 12.94 NAME 12.95 STREET ADDRESS 12.96 CITY-ST-ZIP 12.97 TITLE 12.98 NAME 12.99 STREET ADDRESS 12.100 CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP 13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-ST-ZIP 13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-ST-ZIP 13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-ST-ZIP 13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-ST-ZIP 13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-ST-ZIP 13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-ST-ZIP 13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-ST-ZIP 13.33 TITLE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-ST-ZIP 13.37 TITLE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-ST-ZIP 13.41 TITLE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-ST-ZIP 13.45 TITLE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-ST-ZIP 13.49 TITLE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-ST-ZIP 13.53 TITLE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-ST-ZIP 13.57 TITLE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-ST-ZIP 13.61 TITLE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-ST-ZIP 13.65 TITLE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-ST-ZIP 13.69 TITLE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-ST-ZIP 13.73 TITLE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-ST-ZIP 13.77 TITLE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-ST-ZIP 13.81 TITLE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-ST-ZIP 13.85 TITLE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-ST-ZIP 13.89 TITLE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-ST-ZIP 13.93 TITLE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-ST-ZIP 13.97 TITLE 13.98 NAME 13.99 STREET ADDRESS 13.100 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 change of address is applicable with an address SIGNATURE: <u>Armando Alfonso</u> 4-29-98 (305) 634-9415 Date: _____ (Daytime Phone #)			

CR2E034 (10/97)