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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000071381 (5)

**AUTOMOTORS OF AMERICA, INC.** 

## **FILED** May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						-{		PO 1801 HADI 1800 I	
2370 N.W 96TH AVENUE 2370 N.W 96TH AVENUE									
MIAMI FL 33		MIAMI FL 33172	•						
						DO NOT WRITE IN THIS S  3. Date incorporated or Qualified	PACE		
						09/28/1994			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		pplied For	
21		26				65-0525497		lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	— '			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the curre		'	
24	25 9. Name and Address of Curre	29	30			Personal Property Tax due June 30.		No	
		ent negistered Agent		61	Name	IV. Hamo and Address of New Hogistered A	Saur_		
	NGUART, JULIO E								
	28 BRICKELL AVENUE		62 Street A			ess (P.O. Box Number is Not Acceptable)			
	NN FLOOR Ami Fl 33131			63					
MIN	AMI EL 33131								
			i	84	City	FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	502 and 607 1508. Florida Statut	es, the at	nove	e-named corp	poration submits this statement for the purpose of	changing	its registered	
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was	authorized	d by	the corporati	oration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint the appoint is the statement of the appointment of the appoin	intment a	s registered	
	m tamiliar with, and accept the obli	gations of, Section 607.0505, Fi	oriua Siai	utes	<i>i</i> .				
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable [NO]	E: Registered	egA t	ent signature require	ed when reinstating) DATE			
12.		ND DIRECTORS	13.	<u> </u>		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE			1.1 TI	1.1 TITLE			Change	☐ Addition	
NAME	<b>G</b> UERREIRO, MARIO D.N.		1.2 NAM						
STREET ADDRESS	2370 N.W 96TH AVENUE		1.3 ST		ADDRESS				
CITY-ST-ZIP	MIAMI FL 33172				T-ZIP				
TITLE	D	☐ DELETE	DELETE 2.1 TI				Change	Addition	
NAME	<b>G</b> UERREIRO, MARIA T.C.		2.2 NA	2.2 NAME					
STREET ADDRESS	2370 N.W 96TH AVENUE		2.3 \$		ADDRESS				
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CITY		IT-ZIP				
TITLE		☐ DELETE	DELETE 3.1 T				Change	Addition	
NAME			3.2 NA						
STREET ADDRESS	•				ADDRESS				
CITY-ST-ZIP		briete	3.4. C		iT-ZIP		Change	Addition	
TITLE		☐ DELETE	4.1 Til				Сланув	☐ Addition	
NAME			4.2 N		1000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CI 5.1 TI		T-ZIP		Change	☐ Addition	
		DECEME	5.1 N			'	Snange		
NAME Street address					ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CI 6.1 TI		1-217		Change	☐ Addition	
NAME		- Deceit	6.2 NA			·			
STREET ADDRESS					ADDRESS				
!					ST-ZIP				
CITY-ST-ZIP	The state of the s	with this films done not swellful				Section 110 07/3Vi) Florida Statutes I further cor	tifu that th	o information	

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify 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 Rlock 12 or Block 13 if changed, or open; attachment with an address.