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Apr 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P94000072692 (4)**

1. Corporation Name
AUTOREACH, INC.

Principal Place of Business

**1730 LEE ROAD
A
ORLANDO FL 32810
US**

Mailing Address

**P.O. BOX 720355
ORLANDO FL 32872-0355
US**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 **854 Copperfield Terr**

27 Suite, Apt. #, etc.

28 City & State

29 **Casselberry, FL**

30 Zip Country

31 **32707 USA**

3. Date Incorporated or Qualified

01/01/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3286698

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐ **\$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

**JUSTO G. RIVERA
9884 DEAN OAKS CT.
ORLANDO FL 32825**

10. Name and Address of New Registered Agent

81 Name **Mario D. Cajamarca**

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

83

84 City **Casselberry**

FL

85 Zip Code **32707**

11. Pursuant to the provisions of Sections 607.0502 and 607.1908, 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 of principal officer or principal registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-9-97

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **RIVERA, JUSTO G**
STREET ADDRESS **9884 DEAN OAKS COURT**
CITY-ST-ZIP **ORLANDO FL 32825**

TITLE **VP & Sec.** ☐ DELETE

NAME **Mario D. Cajamarca**
STREET ADDRESS **854 Copperfield Terr**
CITY-ST-ZIP **Casselberry FL 32707**

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

☒ Change ☐ Addition

**1730 Lee Rd, Ste A
Orlando, FL 32810**

☐ Change ☒ Addition

**1730 Lee Rd, Ste A
Orlando, FL 32810**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-9-97 (407) 244-5101

CR2E034 (9/96)