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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000077002 (1)

FILED Apr 25 1997 8:00am Secretary of State

1. Corporation Name AUTOMOTIVE ENTERPRISES, INC. OF N.J. Principa: Place of Business 6601 LYONS ROAD, STE. F-2 COCONUT CREEK FL 33073 Mailing Address 6801 LYONS ROAD, STE. F-2 COCONUT CREEK FL 33073-362				 				
					Date Incorporated or Qualified 10/19/1994		te of La 15/199	st Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21 Suite, Apt.	ft vito	Suite Apt. #, etc.			65-0545516		PO 7	Not Applicable
22	#, etc	27 Soite, Apr. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Stat	()	City & State		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6. Election Campaign Financing			00 May Be
23		28			Trust Fund Contribution			led to Fees
Zφ	Country	Zip	Countr	ry	8. This corporation has liability for			er s. 199.032,
24	25	29	30			Yes [
	9. Name and Address of Curr	rent Registered Agent	81	4 Name	10. Name and Address of New Re	gistered /	lgent	
	NEDON, STEVEN S			1 Name				
	20 N.W. 55TH PLACE		82	2 Street Add	dress (P.O. Box Number is Not Acceptal	ble)	,	
UUI	RAL SPRINGS FL 33076		83	3				
				<u>]</u>				
		•	84	4 City		FL	85	Zip Code
	registered agent, or both, in the Sta im familiar with, and accept the obl	alte of Florida. Such change was ligations of, Section 607.0505, F	ites, the abor authorized b lorida Statute	ve-named corp by the corpora es.	rporation submits this statement for the pation's board of directors. I hereby acce	purpose or pt the appo	pintmen	t as registered
office or i agent. I a SIGNATURI 12.	Signal in: typed or profes name of registered of OFFICERS A	agent and title 1 applicable. (NC			rporation submits this statement for the pation's board of directors. I hereby accelulated when renstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIREC	TORS IN 12
SIGNATURE 12. THE	Signal vs. typed et prittes rame of registered of OFFICERS A	agent and title 1 appricable. (NO	13.	gent signature requ	ulred when reinstaling)	DATE		TORS IN 12
SIGNATURE 12. THEF NAME	Signal in typed or prices raine of registered a OFFICERS A C BENEDON, IRV	agent and the Lappincable. (NO AND DIRECTORS DELETE	13. 1.1 TIFLE	gent signature requ	ulred when reinstaling)	DATE	DIREC	TORS IN 12
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4. If 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 attaghment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97 Date

954-420-0293