FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 9:43

TALLAHASSEE, FLORIDA

DOCUMENT # P94000080599 (1)

1. Corporate Name

BEVERLY GABRIEL, CRNFA, P.A.

Principal Place of Business: P.O. BOX 4554 SOUTH DAYTONA FL 32121-4554

Mailing Address: P.O. BOX 4554 SOUTH DAYTONA FL 32121-4554

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/03/1994

3a. Date of Last Report:

4. FEI Number: 59-3277666 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

GABRIEL, BEVERLY
5836 W. PORT DRIVE
PORT ORANGE FL 32127

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 TITLE	P/D ☐ Change ☐ Addition
NAME	GABRIEL, BEVERLY	1 NAME	
STREET ADDRESS	5836 W. PORT DRIVE	1 STREET ADDRESS	
CITY-ST-ZIP	PORT ORANGE FL 32127	1 CITY-ST-ZIP	
TITLE		2 TITLE	☐ Change ☐ Addition
NAME		2 NAME	
STREET ADDRESS		2 STREET ADDRESS	
CITY-ST-ZIP		2 CITY-ST-ZIP	
TITLE		3 TITLE	☐ Change ☐ Addition
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Beverly Gabriel President — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4-26-95 Daytime Phone: 904-761-2372

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CORPORATE ANNUAL REPORT

1995

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95 APR 11 AM 9:49

TALLAHASSEE, FLORIDA

DOCUMENT # P94000080916 (7)

BAHA AUTOMOTIVE EXPORTERS INC.

Principal Place of Business: ~~2145 N.E. 204TH STREET NORTH MIAMI BEACH FL 33179~~

Mailing Address: ~~2145 N.E. 204TH STREET NORTH MIAMI BEACH FL 33179~~

3. Date Incorporated: 11/02/1994

2. Principal Place of Business: 21 5220 NW 72 AVE; 22 BAY # 24; 23 MIAMI FL; 24 33166

2a. Mailing Address: 26 SAME

4. FEI Number: 65 0536020

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

PINKWASSER, ALAN
2145 N.E. 204TH STREET
NORTH MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent

81 Name: SAME

84 City: FL

12. OFFICERS AND DIRECTORS

D
~~PINKWASSER, ETHEL~~
~~2145 N.E. 204TH STREET~~
~~NORTH MIAMI BEACH FL 33179~~

D
~~PINKWASSER, RANDI~~
~~2145 N.E. 204TH STREET~~
~~NORTH MIAMI BEACH FL 33179~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

P/TRES.
Rolando Acevedo
10340 SW 35 ST
Miami FL 33165

V-P/SEC
JOSE F. CARTAYA JR.
7000 SW 63 AVE
Miami FL 33143

14.

SIGNATURE: [signature] Secretary 4-20-95 305 994-9922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0196600 CP