

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JAMES B. WATKINS
Secretary of State
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

NOV 20 1995

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000083297 (9)**

Is Corporation a Partner

JASON'S AUTO SALES, INC.

Principal Office of the Corporation

245 NW 1ST AVE
HALLANDALE FL 33009

Minor Office

245 NW 1ST AVE
HALLANDALE FL 33009

See new mailing
address

Excluded Under the Truth in Lending Act

3. Date the Corporation was Organized

11/15/1994

3a. Date of Last Report

2. Principal Office of the Corporation

21. 245 N.W. 1st Ave.

2a. Minor Office

26. 7000 S.W. 22nd COURT

22. City, State, and Zip

23. Hallandale, Florida

27. Zip

27. 127B

28. City, State, and Zip

28. DAVIE, Florida

24. 33009

25. Broward

29. 33317

30. Broward

4. FIC Number

65-0535429

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contributions

☐ \$5.00 May Be
Added to Fees

8. This corporation has authority for initiation for control of its affairs
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CIAVATTO, DOMINIC L
2201 SHERIDAN ST
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81. Name

82. Street Address (If a Box Number is Not Applicable)

83. City, State, and Zip

84. City, State, and Zip

FL

85. Zip Code

11. The undersigned, by executing this report, certifies that the information furnished herein is true and correct, and that the undersigned is a duly qualified officer or director of the corporation, and is authorized to execute this report. The undersigned is a resident of the State of Florida.

SIGNATURE

Dominic Louis Ciavatto

4125-195

12. LEADING MEMBERS

NAME

OFFICE

NAME

OFFICE

NAME

OFFICE

NAME

OFFICE

NAME

OFFICE

NAME

OFFICE

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OFFICE

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OFFICE

NAME

OFFICE

P/S
PRESIDENT
ROSA LINDA BAMEL
2102 S.W. 72nd AVE.
DAVIE, FL 33317

President

V
VICE PRESIDENT
DOMINIC L. CIAVATTO
1016 GUYANA ISLE
FT. LAUDERDALE, FL

Secretary

T
TREASURER
MURRAY BAMEL
200 GATE RD. (APT. N101)
HOLLYWOOD, FL 33024

14. I, the undersigned, certify that the information required by this chapter is true and correct, and that the undersigned is a duly qualified officer or director of the corporation, and is authorized to execute this report. The undersigned is a resident of the State of Florida.

SIGNATURE:

Dominic Louis Ciavatto

4-25-95 (301) 920-2276

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
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1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Montano
Secretary of State
Office of the Secretary of State

DOCUMENT # P94000083482 (7)

ANJULY RAGS, INC.

APPROVED
AND
FILED

11/16/1994

STATE
FLORIDA

3533 NORTHWEST 58TH STREET
MIAMI FL 33142

3533 NORTHWEST 58TH STREET
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification
11/16/1994

3a. Date of Last Report

4. FDI Number
CJ-031270

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. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

25. Country

28. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TROCHEZ, HUGO A
3533 NORTHWEST 58TH STREET
MIAMI FL 33142

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

Signature of Registered Agent (if different agent, see the following)

Signature of Registered Agent (if different agent, see the following)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
DE TROCHEZ, ANA J
2. STREET ADDRESS
3533 NORTHWEST 58TH STREET
3. CITY, ST, ZIP
MIAMI FL 33142

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2. NAME
TROCHEZ, HUGO A
3. STREET ADDRESS
3533 NORTHWEST 58TH STREET
4. CITY, ST, ZIP
MIAMI FL 33142

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3. NAME
4. STREET ADDRESS
5. CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4. NAME
5. STREET ADDRESS
6. CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5. NAME
6. STREET ADDRESS
7. CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. Further, I certify that the information supplied in this filing is required for supplemental annual report of this corporation and is not required for the corporation's annual report of this corporation. I am a duly qualified officer or director of the corporation and I am authorized to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-25-95 (305)635 0333