FILED Apr 27, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

T. Corporation	MENT # P9400 0 Y AUTOPAINT ENTERPRISE								
Principal Place	e of Business	Mailing Address			'	I ROMANDA AND INCHA NAMA NAMA	# 8441 8 8464 # 8181	KO IKI TODIO TIDO	IE 11(8) VUSI 1001
11042 SW 129T	TH PLACE	11042 SW 129TH PLACE							
MIAMI FL 33180	6	MIAMI FL 33186			DO NOT WRITE IN THIS SPACE				
					3. Date I	ncorporated or Qualife		017102	
						0/1994			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI N			A	pplied For
21		26			59-3	2 <u>81543</u>			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifo	ate of Status Desired		* *	Additional ecuired
22		27							
City & State	e	City & State				n Campaign Financing	,		May Be tc Fees
23 Zip	Country		Country			und Contribution	erent year at		IC Fees
24	25		30			orporation owes the cut al Property Tax.	nem year na	angible ☐ Yes	≀ ⊡ No
	9. Name and Address of Curre		30			and Address of New	Registered	Agent	
	J. Harro dila Adila sa al-		81	Name					
Rodriguez, Jorge				C11	Address (B.O. Bar	Number is Not Accep	-table)		
1104	12 SW 129TH PLACE		82	Street	Address (P.O. Box	Number is not Accep	nable)		
MIAMI FL 33186			83						
			94	0:4:				85 Zip	Code
			84	City			FL	. 65 210	C 3de
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and a cept the obligations of the section of the	of Florida. Such change was au ations of, Section 607.0505, Flori	thorized by da Statutes	the corp	ooration's board of	directors. I nereby acc	ept the aproir	ntment as re	eg stered
12.		N) DIRECTORS	13.			ONS/CHANGES TO C	FFICERS AN	D DIRECTO	OFIS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	•	T			Change	☐ Addition
NAME	RODRIGUEZ, JORGE		12 NAME						;
STREET ADDR :SS	11042 SW 129TH PLACE		13 STREET	ADDRESS	s				1
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	2.1 TITLE		DIRECTOR			1	Addition
NAME			2.2 NAME		KRachel	le rui E	od risa	ルセ	ı
STREET ADDR ESS			2.3 STREET	ADDRESS	11042 5	w lagth	place	=	
CITY-ST-ZIP			2.4 CITY-S	T-ZIP	Miami	le M.P. W 129th Flor	104	33180	
TITLE			3.1 TITLE					Change	Addition
NAME			3.2 NAME						
STREET ADDR :SS			3.3 STREET	ADDRESS	s				1
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	ļ <u></u>				
TITLE		☐ DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME			4. 2 NAME						
STREET ADDR ISS	,		4.3 STREET		·				
CITY-ST-ZIP		Desert	4.4 CITY- S	T-ZIP	-			Change	Addition
TITLE		☐ DELETE	5.1 TITLE					□ change	CT WOODOLL
NAME			5.2 NAME	r ADDDEEO					ļ
STREET ADDRESS			5.3 STREET 5.4 CITY-S		<u>'</u>				
CITY-ST-ZIP		DELETE	6.1 TITLE	1 · ZIP	 			☐ Change	Addition
TITLE		□ occcie	6.2 NAME						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(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 change-1, or on an attact ment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS