

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000010572 (2)

1. Corporation Name

H & I AUTO SALES, INC.



Principal Place of Business

Mailing Address

5612 E 8TH AVE  
HIALEAH FL 33013

5612 E 8TH AVE  
HIALEAH FL 33013

3. Date Incorporated or Qualified  
02/08/1995

3a. Date of Last Report

2. Principal Place of Business

21 11337 NW 7 Ave

Suite, Apt. #, etc.

22

City State MIAMI FL

24 33168

25 USA

2a. Mailing Address

26 11337 NW 7 Ave

Suite, Apt. #, etc.

27

City State MIAMI FL

29 33168

30 USA

4. FEI Number

650549938

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

9. Name and Address of Current Registered Agent

HOLZBERG, IRA  
5612 E 8TH AVE  
HIALEAH FL 33013

10. Name and Address of New Registered Agent

81 Name

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

11337 NW 7 Ave

83

City MIAMI

FL

85 33168

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

(Date)

12. OFFICERS AND DIRECTORS

TITLE  
NAME D HOLZBERG, IRA  
STREET ADDRESS 7881 NW 169TH TER  
CITY - ST - ZIP MIAMI FL 33016

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

6521 Carpenter Rd #G104  
MIAMI LAKES, FL 33014

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐

Change

☐

Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐

Change

☐

Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐

Change

☐

Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐

Change

☐

Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐

Change

☐

Addition

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, 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

7/24/96

305 258 5701

Date

Daytime Phone #

CR2E034 (3/96)