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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED

Feb 13, 1999 8:00am

Secretary of State

02-13-1999 90029 037 ***150.00

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **P95000028248**1. Corporation Name

STREET ADDRESS

SIGNATURE

CITY-ST-ZIP

POMPANO AUTO RADIO & AIR, INC.

Principal Place of Business		Mailing Addre	ess					
2701 N DIXIE HWY			2701 N DIXIE HWY					
POMPANO BEACH FL 33064		POMPANO BE	POMPANO BEACH FL 33064			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						04/06/1995		
2. Principal P	Place of Business	2a. Mailing A	ddress			4. FEI Number	- A	pplied For
2. Finicipal Flace of Business					65-0574020		ot Applicable	
			ite, Apt. #, etc.			5 Certificate of Status Desired	*	Additional -
13		27	27			5. Certificate of Status Desired	Fee F	tequired
City & Stat	te		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip		Country	1	8. This corporation owes the current year		П.,
24	25	29	30			Personal Property Tax.	☐Yes	□No
	9. Name and Address of Currer	nt Registered Age	nt			10. Name and Address of New Register	ed Agent	
	1741 ET 01718 ET 170			81	Name			
	NZALEZ, BIENVENIDO			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	1 N DIXIE HWY					And the second s		
PON	MPANO BEACH FL 33064			83	1			
				84	City		85 Zic	Code
				1-	- 7	poration submits this statement for the purpose	·L	
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable. ND DIRECTORS	(NOTE: Reg	jistered Age	ent signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12. TITLE	DPT DPT		DELETE	1.1 TITLE		1983 TV 1973	Change	
NAME	GONZALEZ, BIENVENIDO			1.2 NAME				
STREET ADDRESS	404 OF 44 OT			1.3 STREI	ET ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL			1.4 CITY-1	ST-ZIP			
TITLE	DS	[DELETE	2.1 TITLE		1	- Change	e 🔲 Addition
NAME	GONZALEZ, BRUNILDA			2.2 NAME				
STREET ADDRESS	004 OF 44 OT			2.3 STRE	ET ADDRESS		1	
CITY-ST-ZIP	DEERFIELD BEACH FL			2. 4 CITY-	ST-ZIP			
TITLE			DELETE	3.1 TITLE			Chang	a Addition
NAME .				3.2 NAME				
STREET ADDRESS	s			3.3 STRE	ET ADDRESS		1	(b) (c)
CITY-ST-ZIP]			3.4, CITY-	ST-ZIP		<u> </u>	* 12* 10h
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NAME				4, 2 NAM	■			
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TITLE		- •		4.3 STRE 4.4 CITY-	1.			
NAME		!	□ DELETE		ST-ZIP		Chang	e
		- "	□ DELETE	4,4 CITY-	ST-ZIP		Chang	e
STREET ADDRESS	s	- · · · · · · · · · · · · · · · · · · ·	□ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME	ST-ZIP		Chang	e
	is .	_ •	□ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ST-ZIP ET ADDRESS ST-ZIP		· ·	
STREET ADDRESS CITY-ST-ZIP TITLE	is .		DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE	ST-ZIP ET ADDRESS ST-ZIP		☐ Chang	

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 chapted, or on an attachment with an address, with all other like empowered.