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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000053228 (9)

FILED Mar 27 1998 8:00am Secretary of State

RAMM/	ARS AUTOMOTIVE, INC.						
Principal Place of Business Mailing Address							F SOURSON SID INITE AND IN MOUNT DOING DOING DOING AND SIDE SOURS AND SIDES
·			4771 N.W. 72ND AVE.			•	
MIAMI FL 33166 MIAMI FL 33166							
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
						07/11/1995	
2. Principal P	lace of Business	2a. Mailin	2a. Mailing Address				4. FEI Number Applied For
21		26					65-0601277 Not Applicable
Sulte, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27					Fee Required
City & State	е	City &	City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	<u> </u>		<u> </u>	intry	,	8. This corporation owes or has paid the current year Intangible	
				30	,		Personal Property Tax due June 30. Yes Yo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
LO	GAN, RALSTON				81 Name		
47	71 N.W. 72ND AVE.				B2	Street Ado	dress (P.O. Box Number is Not Acceptable)
MIAMI FL 33166							,
					83		
							lool 7's Oads
					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, typed or printed name of registered		O/I) .akt		d Age	ent signature requ	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTORS 13.		TLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE					Ci comite Ci vocation		
NAME		4394 MAN BOND AND		1.2 N			
STREET ADDRESS			1.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33166			1.4 CITY-		T-ZIP	
TITLE	D		☐ DELETE	2.1 TI	TLE		Change L Addition
NAME			2.2 N	AME			
STREET ADDRESS	1	■ In the state of		2.3 S	TREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166			2.40	HY-S	ST-ZIP	
TITLE	D DELETE 3.1 T		TLE		Change Addition		
NAME	LOGAN, IRIS	LOGAN, IRIS		3.2 N	AME		
STREET ADDRESS	4771 N.W. 72ND AVE.		3.3.5		TREET	ADDRESS	ļ
CITY-ST-ZIP	-ZIP MIAMI FL 33166		3.4		ITY-S	ST - Z IP	
TITLE	DELETE 4:		, 4.1 T)	TLE		☐ Change ☐ Addition	
NAME				4.21	IAME		
STREET ADDRESS				4.3 S	TAEET	ADDRESS	
CITY-S1-ZIP				1		IT-ZIP	
TITLE			DELETE	5.1 TITLE			Change Addition
NAME				52 N	AME		
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP						ST-ZIP	
TITLE			DELETE	_		rt £H	☐ Change ☐ Addition
				6.1 TITLE 6.2 NAME			_ crange _ radiidii
NAME CTOCCT LOCACCC		\sim				ADDRESS	
STREET ADDRESS	/	-					
CITY-ST-ZIP	partify that the information supplied	with this filing do	ne not qualify			I-ZIP	n Section 119 07/31/i) Floride Stelutes I further certifu that the information
14. I hereby certify that the information supplied with this filing does not qualify to 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 securate 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 of the receiver or trustee empowers 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.							