

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 OCT -6 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000057694 (8)

1. Corporation Name

GABBY'S AUTO SALES, INC.



Principal Place of Business

605 N.W. 31 AVE. #B-5
POMPANO BEACH FL 33069

Mailing Address

605 N.W. 31 AVE. #B-5
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/26/1995

3a. Date of Last Report

08/09/1996

4. FEI Number

65-0595832

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2380 NW 30 COURT

Suite, Apt. #, etc.

22

City & State

23 FORT LAUDERDALE FL

Zip

24 33311

Country

25 USA

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

TORLASCHI, DARDO J
605 N.W. 31 AVE. #B-5
POMPANO BEACH FL 33069

81 Name

82 SAME

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

2380 NW 30 COURT

84

City

FORT LAUDERDALE

FL

85 Zip Code

33311

10. Name and Address of New Registered Agent

(11) Pursuant to the provisions of Sections 607.0507 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]

DIRECTOR

10-2-97

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME TORLASCHI, DARDO J
STREET ADDRESS 2285 N.W. 49TH COURT
CITY-ST-ZIP LAUDERHILL FL 33319

TITLE SD ☐ DELETE

NAME MUNOZ, GABRIELA M
STREET ADDRESS 7285 N.W. 49TH COURT
CITY-ST-ZIP LAUDERHILL FL 33319

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME TORLASCHI, DARDO J
1.3 STREET ADDRESS 7321 NW 45 ST
1.4 CITY-ST-ZIP LAUDERHILL FL 33319

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME GABRIELA MUNOZ
2.3 STREET ADDRESS 7321 NW 45 ST
2.4 CITY-ST-ZIP LAUDERHILL, FL 33319

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

REINSTATEMENT

200002317452--5

10/10/97 01073-021
****750.00 ****750.00

(13) I do 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 changed, or on an attachment with an address.

SIGNATURE

[Signature]

10-2-97

10-2-97

CR2E034 (4/97)