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 P95000070536 (4)

PICTURE CARS & COMMUNICATIONS, INC.

FILED May 18 1998 8:00am Secretary of State



					·	INDII DAIDI DIIBA IIIID BIII IBBI
Principal Plac		Mailing Address	. 500			
% ANGELA P. O. BOX	TIRU. ESO. 770331	% angela tiru. Esq. P. O. Box 770331				
CORAL GABLES FL 33077		CORAL GABLES FL 33077			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
		. 1 5			09/13/1995 4. FEI Number	A - E d Ta
2. Principal Place of Business		2a. Mailing Address			65-06 19808	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23 CORA	L SPRINGS FL	28 CORAL	Spring	5, FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the o	
24	25	29	30	T	Personal Property Tax due June 30.	Y Yes No
	Name and Address of Currer			81 Name	10. Name and Address of New Registere	а Адепт
TIHU-ABBATIELLU, ANGELA ESU.				Name		
2600 N. ANDREWS AVENUE				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
F	ORT LAUDERDALE FL 33311			83		
				84 City	F	85 Zip Code
dd Directoral	to the provisions of Continue 607 050	12 and 607 1509 Florid	Statutes the a	hove pamed co	rporation submits this statement for the purpose	
office or i	rogistered about or both, in the State	eof Horida, Such ch an a	o was authorize	id by the corpora	ation's board of directors. I hereby accept the a	ppointment as registered
agent. I a	am familiar with, and accept the oblig	ations of, Section 607.0	505, Florida Sta	tutes.		
SIGNATURE	Signature, typed or pointed name of requirement ap-	ont and this of applicable	(NOTE Registers	d Agent signature req	uired when reinstating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	DEL	ETE 1.1 T	ITLE		☐ Change ☐ Addition
NAME	ABBATIELLO, DOMINIC A.		1.2 N	IAME		
STREET ADDRESS	C/O ANGELA TIRU, P.O. BO	DX 770331 N/A	1.3 S	TREE LADDRESS		İ
CITY-ST-ZIP	CORAL SPRINGS FL			ITY-ST-ZIP		
TITLE	1	DEL	ETE 2.1 T	ITLE		Change Addition
NAME			2.2 N	AME		
STREET ADDRESS			235	TREET ADDRESS		
CITY-ST-ZIP				CHTY-ST-ZIP		Change Addition
TITLE		L DEL				LT cuantite LT vocition
NAME			32 N			
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP		☐ DEL		CITY-ST-ZIP	<u> </u>	Change Addition
TITLE		DEL		NAME		C CHOING C FINANCIAL
NAME PARET ADODESC				TREET ADDRESS		
STREET ADDRESS				SITY-ST-ZIP		
CITY-ST-ZIP TITLE		DEL				Change Addition
NAME		<u> </u>	5.2 N	I .		–
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				SITY-ST-ZIP		
TITLE		DE1				☐ Change ☐ Addition
NAME			6.2 N	į		
STREET ADDRESS				TREET ADDRESS		
City St - 7iP			6.4 0	CITY - ST - ZIP		
14. I hereby	certify that the information supplied v	vith this filing y does n ot c	jualify for the ex	emption stated	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information

I reflort is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a Motoc empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

MUNIC A ABBAMELLO 4-28-98 954-541-1990