## 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 # P95000076843 (8)

## FILED Feb 25 1998 8:00am Secretary of State

AUTON	NOTIVE REAL ESTATE OF F	LORIDA, INC.					
Principal Place of Business Mailing Address					I seemen to the shift fill band bein	MOINT SANG BINDS SO	in <b>astra</b> isti ( <b>hå</b> t
8725 ARLINGTON EXPRESSWAY  JACKSONVILLE FL 32211  8725 ARLINGTON EXPRESSWAY  JACKSONVILLE FL 32211							
					DO NOT WRITE t  3. Date Incorporated or Qualified	N THIS SPACE	
					10/06/1995		
2 Principal F	Place of Business	2a, Mailing Address			4. FEI Number		Applied For
26]					59-3338641	<del> </del>	Not Applicable
Suite, Apt. #, etc Suite. Apt. #, etc						<b>\$8.7</b>	75 Additional
27					5. Certificate of Status Desired	Fe	e Required
City & Sta	te	City & State			6. Election Campaign Financing	\$5.	00 May Be
23		28			Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Countr	ry	8. This corporation owes or has paid		
24	25	29	30		Personal Property Tax due June 3		No.
	g. Name and Address of Current	it Registered Agent	B1	Name	10. Name and Address of New Reg	stered Agent	<del></del>
	T CORPORATION SYSTEM		"	IVALENCE			
1200 SOUTH PINE ISLAND ROAD				2 Street Add	dress (P.O. Box Number is Not Acceptable	<del>)</del>	
PL	ANTATION FL 33324		83	<u>-</u>			· · · · · · · · · · · · · · · · · · ·
				1			
			84	City		FL 85	Zip Code
44 Dureuant	to the provisions of Soctions 607.050	2 and 607 1509 Florida State	ites the show	/o named cor	coration cultimits this statement for the run		na its registered
agent I a	am familiar with, and accept the obligation of repotent age.				poration submits this statement for the putition's board of directors. I hereby accept aired when reinstating)	DATE	a logisleled
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12
THLE	D	☐ DELFTE	1.1 TITLE			Cha	
NAME	ITO, SETSUJI		1.2 NAME				
STREET ADDRESS	700 8TH STREET, SOUTH		1.3 STREE	T ADORESS			
CITY-ST-ZIP	BIRMINGHAM AL 35233		1.4 CITY-	ST-ZIP			
TITLE	D	☐ DELETE	2 1 TITLE			Cha	nge 🗀 Addition
NAME	MACHIDERA, HIROSHI	141	2.2 NAME				
STREET ADDRESS	8725 ARLINGTON EXPRESSY	YAY	2 3 STREE	T ADDRESS			
CITY - ST - ZIP	JACKSONVILLE FL 32211		2 4 City	-ST-ZIP		-1	
TITLE	1	☐ DELETE	3 1 THTLE			Char	nge L Addition
NAME			3 2 NAME	j			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	3.4. TY	- ST - ZIP	77777	☐ Chai	nge Addition
TITLE							iño (Ti vinciglo)
NAME CREET ADDRESS			4. M8				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETÉ	5.	S1 - ZiP	· · · · · · · · · · · · · · · · · · ·	☐ Cha	nge Addition
NAME	1		5.2 AE				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 Cl Y-	1			
TITLE		DELETE	6.1 Title	D1-20	· · · · · · · · · · · · · · · · · · ·	☐ Chai	nge
NAME	)		6.2 NAME			_	
STREET ADDRESS			1	T ADDRESS			
CITY-ST-ZIP			6 4 CITY-				
	<del></del>		0 7 01/11				

4. 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 treateness there 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 attaichment without address.

Hindy Machiden

2/17/4

904-721-1880