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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000077866

1. Corporation Name

CALIMA AUTO SALES, CORP

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90027 036 ***150.00

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	1. · · · · · · · · · · · · · · · · · · ·	_						Hill			1 (H & 1 (H) 1 1 1 1
Principal Place of Business Mailing Address										,, ,,,,,,	
8725 N.W. 117 STREET BAY 14 8725 N.W. 117 STREET BAY			Y 14								
HIALEAH G. FL 33018 HIALEAH G. FL 33018							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				
	•						10/06/1995				
2. Principal Pl	ace of Business	2a.	Mailing Address				4, FEI Number			Apr	olied For
21	`. 	26					65-0614126		ᆜ		Applicable
Suite, Apt. #, etc. 27			Suite, Apt. #, etc.				5. Certifcate of Status Desired \$8.75 Additional Fee Required				
City & State	3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	28	City & State	-		-	6. Election Campaign Financing Trust Fund Contribution	٠.		5.00 i	May Be Fees
Zip	Country		Zip	Cou	ntry		8. This corporation owes the current yes	ar Inta	ingible	,	
24	25	29	,	30			Personal Property Tax.		XYe		□No
	9. Name and Address of Curr	rent Regist	ered Agent				10. Name and Address of New Registe	red /	\gent		
	700 FD41/0/00 4				81	Name					
	ZCO, FRANCISCO J				82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
	N.W. 117 STREET BAY 14										
HIAL	EAH G. FL 33018				83						
					84	City			85	Zip C	ode
							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>FL</u>	1	ina ita	registered
11. Pursuant to office or reagent. I as	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	9502 and 60 hte of Florida igations of, 3	7.1508, Florida Statut a. Such change was a Section 607.0505, Flo	es, the at uthorized rida Statu	bove by t utes.	the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the a	ippoir	nangi	as reg	pistered
SIGNATURE											(
	Signature, typed or printed name of registered		, , , , , , , , , , , , , , , , , , ,		Agent	t signature required	d when reinstating) DA ADDITIONS/CHANGES TO OFFICER		D DID	ECTO	DC IN 12
12.	OFFICERS	AND DIREC	DELETE	13.			ADDITIONS/CHANGES TO OFFICEN	S AIV	☐ CH		Addition
TITLE	P OROZCO, FRANCISCO J						•				
NAME	7210 N.W. 179 STREET, A	ADTRICAL	. 201	1.2 NA		ADDRESS					}
STREET ADDRESS	MIAMI FL 33015	WILMEIAI	204								\ \
CITY-\$T-ZIP	V V		☐ DELETE	1.4 CIT 2.1 TIT		1-ZIP			□ Ch	ange	Addition
TITLE	CORREA, JUAN D		□ berrie	22 NA						•	_
NAME	7767.W. 29 LANE #101					ADDRESS					1
STREET ADDRESS	HIALEAH FL 33018			2. 4 CI							
CITY-ST-ZIP TITLE	THALLAIT I L GOOTO		☐ DELETE	3.1 TII		1:40			☐ CH	iange	☐ Addition
NAME				3.2 N			المعادي يحمد	+			
STREET ADDRESS	,			1		ADDRESS					
CITY-ST-ZIP	, .			3.4. CI							_
TITLE			☐ DELETE	4.1 TIT		·			CI	nange	Addition
NAME				4.2 N	AME.						ļ
STREET ADDRESS				4.3 ST	REET	ADDRESS					
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TITLE			☐ DELETE	5.1 Ti	TLE					hange	☐ Addition
NAME				5.2 NA	ME						
STREET ADDRESS	•			5,3 ST	REET	ADDRESS		۲			{
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,			5.4 CI		r-ZIP					
TITLE			☐ DELETE	6.1 11					□ cı	hange	Addition
NAME				6.2 NA					•		
STREET ADDRESS			•	6.3 ST	REET	ADDRESS					
1											I

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: