

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000081521 (3)

1. Corporation Name
A-1 TINTING, INC.



Principal Place of Business 602 N.E. 167TH STREET NORTH MIAMI BEACH FL 33167	Mailing Address 602 N.E. 167TH STREET NORTH MIAMI BEACH FL 33167
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 602 NE 167th street Suite, Apt. #, etc. 22 - #A City & State 23 North Miami Beach FL Zip 24 FL 33162 Country 25 Dade		2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 - #A City & State 28 North Miami Beach FL Zip 29 33162 Country 30 Dade		3. Date Incorporated or Qualified 10/24/1995	4. FEI Number 65-0633256	Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

SANTANA, LEONORI
602 N.E. 167TH STREET., #A
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name	Same
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
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 Leonor Santana

Signature, typed or printed name of registered agent and title if applicable

Leonor J. Santana

(NOTE: Registered Agent signature required when reinstating)

04/25/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANTANA, LEONOR	1.2 NAME	
STREET ADDRESS	602 N.E. 167TH ST., #A	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALENTINE, RODOLFO	2.2 NAME	RAMIREZ JORGE
STREET ADDRESS	602 N.E. 167TH ST., #A	2.3 STREET ADDRESS	602 NE 167th St #A
CITY-ST-ZIP	NORTH MIAMI BEACH FL	2.4 CITY-ST-ZIP	North Miami Beach FL
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAGALLANES, PERCY	3.2 NAME	
STREET ADDRESS	602 N.E. 167TH ST., #A	3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALENTINE, MABLE G	4.2 NAME	MAGALLANES, PATRICIA
STREET ADDRESS	602 N.E. 167TH ST	4.3 STREET ADDRESS	602 N.E. 167th St #A
CITY-ST-ZIP	NORTH MIAMI BEACH FL	4.4 CITY-ST-ZIP	North Miami Beach FL
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Leonor Santana Leonor J. Santana 04/25/98 (305) 948 9204

CR2E034 (10/97)