

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Amended Annual Report
 6125

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # P95000084556 (6)
 1. Corporation Name

OVERSEAS TRUCK & AUTO SALES, INC.



Principal Place of Business: 9495 NW 27TH AVE MIAMI FL 33147
 Mailing Address: 9495 NW 27TH AVE MIAMI FL 33147

3. Date Incorporated or Qualified: 11/01/1995
 3a. Date of Last Report
 4. FEI Number
 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 has liability for intangible tax under s. 199.032 Florida Statutes: Yes No

2. Principal Place of Business
 2a. Mailing Address
 21. Suite, Apt. #, etc.
 22. City & State
 23. Zip
 24. Country
 25. Country
 26. Suite, Apt. #, etc.
 27. City & State
 28. Zip
 29. Country
 30. Country

9. Name and Address of Current Registered Agent
 KANONITZ, JAKE
 6311 RODMAN ST
 HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent
 81. Name: GUILLERMO M.P. NUÑEZ
 82. Street Address (P.O. Box Number is Not Acceptable): 3619 S.W. 113th PL
 83.
 84. City: miami FL 85. Zip Code: 33165

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 607.0506, Florida Statutes.
 SIGNATURE: *Guillermo M.P. Nuñez*

12. OFFICERS AND DIRECTORS
 TITLE: Pres. JAKE KANONITZ
 NAME: JAKE KANONITZ
 STREET ADDRESS: 6311 Rodman
 CITY-ST-ZIP: Hollywood FL 33023
 DELETE
 TITLE: DELETE
 NAME: DELETE
 STREET ADDRESS: DELETE
 CITY-ST-ZIP: DELETE
 TITLE: DELETE
 NAME: DELETE
 STREET ADDRESS: DELETE
 CITY-ST-ZIP: DELETE
 TITLE: DELETE
 NAME: DELETE
 STREET ADDRESS: DELETE
 CITY-ST-ZIP: DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: Change Addition
 1.2 NAME: Change Addition
 1.3 STREET ADDRESS: Change Addition
 1.4 CITY-ST-ZIP: Change Addition
 2.1 TITLE: PRESIDENT GUILLERMO M.P. NUÑEZ
 2.2 NAME: GUILLERMO M.P. NUÑEZ
 2.3 STREET ADDRESS: 3619 SW 113th PL
 2.4 CITY-ST-ZIP: miami, FL 33165
 3.1 TITLE: Change Addition
 3.2 NAME: Change Addition
 3.3 STREET ADDRESS: Change Addition
 3.4 CITY-ST-ZIP: Change Addition
 4.1 TITLE: Change Addition
 4.2 NAME: Change Addition
 4.3 STREET ADDRESS: Change Addition
 4.4 CITY-ST-ZIP: Change Addition
 5.1 TITLE: Change Addition
 5.2 NAME: Change Addition
 5.3 STREET ADDRESS: 10000 1899481
 5.4 CITY-ST-ZIP: -07/19/96--01055--010
 5.5: ***70.00
 6.1 TITLE: Change Addition
 6.2 NAME: Change Addition
 6.3 STREET ADDRESS: Change Addition
 6.4 CITY-ST-ZIP: Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *Guillermo M.P. Nuñez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/96 836 0290

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