## 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

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90122 002 \*\*\*150.00

DOCUMENT #	P95000084556	211

1. Corporation Name

OVERSEAS TRUCK & AUTO SALES, INC.

Principal Place of Business 3237 N.W. 67th STREET MIAMI, FL \* 33147

Mailing Address

3237 N.W. 67th STREET MIAMI, FL 33147

,	,				DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed						
2. Principal Place of	Business	2a. Mailing Address			<del></del>	4.	FEI Number		17	Applied For	
. [		26					ł	65-0626825		_ <del></del> -	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required					
City_&_State		- City.& St	late			*	-6.	Election Campaign Financing Trust Fund Contribution			May Be
Zip	Country	Zip		Countr	гу		8.	This corporation owes the cur	ent vear Inta	naible	
1	25	29	[3	30			Personal Property Tax.				
9. N	ame and Address of Curren	t Registered Age	ent				10.	Name and Address of New I	Registered A	gent	
				8.	1 N	lame					
LEIDY RODE	RIGUEZ 67 STREET			82	2 S	treet Addre	ess (P	O. Box Number is Not Accept	able)		
MIAMI, FL				8:	3	<del></del> - <del>.</del>				· · · · ·	
				84	4 C	ity		<del></del>	FL	85 Zip	Code
SIGNATURE Signature,	typeg or printed name of registered ager  OFFICERS AN	nt and title if applicable  D DIRECTORS	(NOTE: F	Registered Age	ent sigr	nature required		einstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECT	ORS IN 12
TLE P/S	<u> </u>	_	DELETE	1.1 TITLE			<u>-</u>	DETITION OF IT IN OLD TO GE	102.101	Change	
ME VÍC	TOR BATISTA 7 N.W. 67th STRI	יביי		1.2 NAME		NDE-00					_
	MI, FL 33147	3131		1.3 STREE							
TY-ST-ZIP MLAI	MI 3 II 33147		DELETE	2.1 TITLE		<u></u>				Change	Addition
ME		-	_ +·-	22 NAME						c.m.igo	
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TY-ST-ZIP				2.4 CITY-							
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Y-ST-ZIP				4.4 CITY-5	ST-ZIP						
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WE				5.2 NAME							
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Y-ST-ZIP				5.4 CITY-5	ST-ZIP						
			DOLCTE	S1TITLE						Change	□ Addition

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 of the receiver of 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.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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