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

PROFIT
 CORPORATION
 ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P9500089069 (5)

THE OUTLET USED CAR CENTER, INC.

Principal Place of Business Mailing Address

C/O TAMIAMI AUTOMOTIVE GROUP

C/O TAMIAMI AUTOMOTIVE GROUP

C/O TAMIAMI AUTOMOTIVE GROUP

C/O TAMIAMI AUTOMOTIVE GROUP

FILED Feb 11 1998 8:00am Secretary of State



C/O TAMIAMI AUTOMOTIVE GROUP 8250 S.W. 8TH ST. MIAMI FL 33144		C/O TAMIAMI AUTOMOTIVE GROUP 8250 S.W. 8TH ST. MIAMI FL 33144		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified 11/20/1995		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	Applied For
21		26			NOT APPLICABLE	N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	ê		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zıp	Country	Zip	Zip Country		8. This corporation owes or has paid the current year Intangible		
			30		Personal Property Tax due June 30. Yes No		
	9, Name and Address of Currer	nt Registered Agent		1	10. Name and Address of New Registered Agent		
	ANAS, CARLOS		81	Name			
	50 SW 8 ST		82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33144		L				
			83	i			
			84	City		85 Zip	Code
				<i></i> ,	Fl		- 0000
11. Pursuant t office or re agent I ar	to the provisions of Sections 607.050 agistered agent, or both, in the State m familiar with, and accept the oblig.	l? and 607-1508, Florida Statute ⊢of Florida. Such change was ai ations of, Section 607,0505, Flor	s, the abov uthorized b rida Statute	re-named co y the corpor is.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing pointment as	its registered s registered
SIGNATURE							
	Signatore, typad or printed hame of requirered app			ent signature rec	quired when reinstating) DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE .	PD	☐ DELETE	11 TITLE			Change	Addition
NAME	PLANAS, CARLOS		1.2 NAME				
STREET ADDRESS	8250 SW 8 ST		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33144		1.4 CITY - :	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	T ADDRESS			
CITY-ST-ZIP		<u>.</u>	2. 4 CITY -	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME			•	
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME	+			
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY - 8	ST-ZIP			
TITLE		☐ D€L€TE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	j			
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY - ST - ZIP			6.4 CITY-5	ST-ZIP			
	ertily that the information supplied w	ith this filing does not qualify for			in Section 119.07(3)(i), Florida Statutes. I further of	ertify that th	e information

14. I heroby 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 exploration or the receiver or indicate opiniowored 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 or an attaching of with an abdress.

SIGNATURE: