

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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **P96000001831 (2)**

1. Corporation Name

NEW ENGLAND AUTO SALES, INC.

Principal Place of Business

**79 NW 8TH ST
BOCA RATON FL 33432
US**

Mailing Address

**69 NW 8 STREET
BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/04/1996

4. FEI Number

65-0634835

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 7171 Opa-Locka Blvd.

Suite, Apt. #, etc.

22 City & State

23 OPA-LOCKA, FL.

Zip

24 33054

Country

25 USA

2a. Mailing Address

26 P.O. Box 294425

Suite, Apt. #, etc.

27 City & State

28 BOCA RATON, FL.

Zip

29 33432

Country

30 USA

9. Name and Address of Current Registered Agent

**MATZENBERGER, CHRISTOF
69 NW 8 STREET
BOCA RATON FL 33432**

10. Name and Address of New Registered Agent

81 Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PVST	<input type="checkbox"/> DELETE
NAME	MATZENBERGER, CHRISTOF	
STREET ADDRESS	69 NW 8 STREET	
CITY - ST - ZIP	BOCA RATON FL 33432	

TITLE	D	<input type="checkbox"/> DELETE
NAME	MATZENBERGER, CHRISTOF	
STREET ADDRESS	69 NW 8 STREET	
CITY - ST - ZIP	BOCA RATON FL 33432	

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	VOTGUPAL, RUDOLPH M	
STREET ADDRESS	69 NW 8TH ST	
CITY - ST - ZIP	BOCA RATON FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	VP
3.3 STREET ADDRESS	CHRIS MATZENBERGER
3.4 CITY - ST - ZIP	69 NW 8TH ST.

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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:

CHRIS MATZENBERGER 04-02-98 561-925-8848

CP2E034 (10/97)