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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT_OF STA Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Jun 02 1997 8:00am

Secretary of State

Change

Addition

DOCUMENT # P9600009090 (7)

METRO TRAFFIC SCHOOL OF KENDALL, INC.

Principal Place of Business Mailing Address 1424 NW LEJEUNE ROAD 1424 NW LEJEUNE ROAD MIAMI FL 83126 MIAMI FL 33126-1413 3. Date Incorporated or Qualified 3a. Date of Last Report 01/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SCHWARTZ, HOWARD 1424 NW LEJEUNE ROAD 82 MIAMI FL 33126 83 84 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. 4N40N SIGNATURE red agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) TITLE DELETE 1.1 TITLE Change SCHWARTZ, HOWARD 1.2 NAME 1424 NW LEJEUNE ROAD STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33126 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TOLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP TITLE DELETE 5.1 TITLE ☐ Change Addition

6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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 roceiver 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

5 4 CHTY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP