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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

0104120

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011063 (0)

| 1. Corporation Namie FOREIGN CAR SALES, INC. Principal Place of Business Mailing Address 2101 AURORA RD. MELBOURNE FL 32935-33 | | | 901 | | | | | | |
|--|--|--|--|--|---|---------------------------------------|--|--|--|
| | | | | | 3. Date Incorporated or Qu 02/01/1996 | valified 3s. D | ate of Last R | eport | |
| . Principal Pla | ace of Business | 2a. Mailing Address | | | 4. FEt Number | 01.1 | An | plied For | |
|] | | 26 | | | 4. FEI Number 59-335 | 8616 | f | t Applicable | |
| – Suite_Apt.≢ | #, etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Des | | \$8.75 | | |
| 1 | | 27 | | | G. Continuate of States Des | | Fee Re | quired | |
| City & State | ! | City & State | | | 6. Election Campaign Finar | | \$5.00 | | |
| Zip | Country | 28 Zip | Country | | Trust Fund Contribution | <u> </u> | Added | | |
|] | 25 | 29 | 30 | | This corporation has liab Florida Statutes | | e tax under s No | . 199.032, | |
| i | 9. Name and Address of Curre | k | 130 | | 10. Name and Address of | | | | |
| CLEV | ELAND, RAOUL C | | 81 | Name | | | | | |
| | AURORA RD. | | 82 | Stroot Adds | ess (P.O. Box Number is Not A | cooptoble) | | | |
| | OURNE FL 32935 | | 02 | Siree(Auoi | ess (F.O. DOX NUMBER IS NOT A | cceptable) | | | |
| | | | 83 | | | | | | |
| | | | 84 | City | ······································ | | 85 Zip | Code | |
| | | | 1 1 | • | | FL | _ ' ' | | |
| IGNATURE . | | | | | oration submits this statement ion's board of directors. I hereb | | | | |
| IGNATURI 2. | Signatine, typed or printed name of registered a OFFICERS A | ngoni and title it applicable (NO ND DIRECTORS | OTE: Registered Agent | I signature requir | ed when reinstating) ADDITIONS/CHANGES To | DATE | D DIRECTOR | IS IN 12 | |
| GNATUHI 2. | Strand mentylect or printed having of registered a OFFICE RS A | gont and title it applicable (No | OTE: Registered Agent | I signature requir | ed when re-netating) | DATE | | IS IN 12 | |
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