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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000017817 (3) DOCUMENT #

DEAL AUTO BROKER, INC.

Principal Place of Business

Mailing Address

9905 NW 79TH AVENUE BAY #37

FILED Feb 23 1998 8:00am Secretary of State



HIALEAH GARDENS FL 33016		HIALEAH GARDENS FL 33016			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
	= .			02/27/1996	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0647059	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has paid the cur	rent year Intangible
24	26		<u>sol</u>	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Current	Registered Agent	81 Name /	10. Name and Address of New Registered	Agent
				s F. Gareia	
1	SW 60TH AVENUE		82 Street Addre	ss (P.O. Box Number is Not Acceptable)	
j MV	AMI FL 33144		2441	SW 138 PC	
I			83		
			84 City	âm) Fl	85 Zip Code 33/75
dd Dienerand	the				33/75
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 heart of directors. I hereby accept the appointment as 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 ragistered agen		Registered Agent signature required		
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	GARCIA, CARLOS F	[] DETELE	1.1 TITLE PD	ear backs F	Change Addition
NAME	55 SW 6TH AVENUE		1.2 NAME	icia larbs f.	
STREET ADDRESS	2		1.3 STREET ADDRESS	liam PL 33175	
CITY-ST-ZIP	MIAMI FL 33144			1am FL 33175	
TITLE	STD SODDIOLIEZ SCHW	☐ DELETE	2.1 TITLE		Change Addition
NAME	RODRIGUEZ, FELIX		2.2 NAME		
STREET ADDRESS	5009 SW 144TH COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33175		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	,	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ì
CITY-ST-ZIP			3,4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		Ì
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZiP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ļ
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby ce	ertify that the information supplied with	this filing does not qualify for t	he everntion stated in So	ection 119.07(3)(i), Florida Statutes. I further cel	rtify 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.					