

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

97 AUG -5 AM 7:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

PROFIT
CORPORATION
ANNUAL REPORT
1997

DOCUMENT # P96000022538 (8)

1. Corporation Name
AUTOVISION, INC.



Principal Place of Business
% L. RUSS
9703 S. DIXIE HIGHWAY #3J
MIAMI FL 33156

Mailing Address
% L. RUSS
9703 S. DIXIE HIGHWAY #3J
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/12/1996 3a. Date of Last Report N/A

2. Principal Place of Business
21 3400 CORAL WAY
Suite, Apt. #, etc.
22 SUITE 403
City & State
23 MIAMI, FL.
Zip
24 33145 Country
25 USA
2a. Mailing Address
26 3400 CORAL WAY
Suite, Apt. #, etc.
27 SUITE 403
City & State
28 MIAMI, FL.
Zip
29 33145 Country
30 USA

4. FEI Number 65-0654455 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUSS, LOUIS D
9703 S. DIXIE HIGHWAY
#3J
MIAMI FL 33156

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 registering)

DATE

12. OFFICERS AND DIRECTORS
TITLE D
NAME OSTER, BRIAN A
STREET ADDRESS 13150 S.W. 83ND COURT
CITY-ST-ZIP MIAMI FL 33156
TITLE D
NAME WALLIS, JOHN
STREET ADDRESS 10 MACOYA ROAD
CITY-ST-ZIP TUNAPUNA TRINIDAD BWI
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D CORRECTION
1.2 NAME OSTER, BRIAN A
1.3 STREET ADDRESS 13150 SW 82ND COURT
1.4 CITY-ST-ZIP MIAMI, FL. 33156
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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

BAK 7/21/07 205 449 4110

CR2E034 (4/97)