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**

DOCUMENT # P96000025906 (4)

FILED Feb 19 1998 8:00am Secretary of State

CAR	CONSULTANTS, INC.					II Band Here ende frak døde blin høde
Dringle of Cit	as of Dusiness	14.9: - 1-1			# #80##80##80##80### 80### 80###	H BBHB H JU I DING IDHA 1811 foil c iùi i f i i
Principal Place of Business Mailing Address 5040N. HILLS DRIVE 5040N. HILLS DRIVE						
5040N. HILLS DRIVE 5040N. HILLS DRIVE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021			21			
					DO NOT WRITE	IN THIS SPACE
					 Date Incorporated or Qualified 03/22/1996 	
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0658759	Not Applicable
—	Suite, Apt. #, etc. Suite, Apt		pt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State		A Floring Country Francisco	Fee Required
23		— — ·	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	intry	This corporation owes or has paid	
24	25	29	30		Personal Property Tax due June 3	· _ · _ ·
	9. Name and Address of Cur	rrent Registered Agent			10. Name and Address of New Reg	istered Agent
	OLCHINSKY, MARK S			81 Name		
5040 N. HILLS DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)		9)
HOLLYWOOD FL 33021						•
				83		
				84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607 (0502 and 607 1508 Floride Ste	tutes the si	nove-named corr	oration submits this statement for the au	FL 65 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, typod or printed name of registered	d agent and title if applicable (N	IOTE: Registered	Agent signature requi	red when reinstating)	DATE
12.	OFFICERS :	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	TOLOUBION TARK	☐ DELETE	1.1 11	LE		☐ Change ☐ Addition
NAME	TOLCHINSKY, MARK		1.2 NA	ME		
STREET ADDRESS	5040 NO HILLS DRIVE HOLLYWOOD FL		1	reet address		
CITY-ST-ZIP	V TOLLI WOOD FL	☐ DELETE		TY-ST-ZIP		T Observed
TITLE NAME	TOLCHINSKY, MERLE		2.1 Til			☐ Change ☐ Addition
STREET ADDRESS	5040 HILLS DRIVE		2.2 NA	· ·		
CITY-ST-ZIP	HOLLYWOO FL			REET ADDRESS		
TITLE		DELETE	2. 4 CI	TY-ST-ZIP LE		Change Addition
NAME			3.2 NA			THE CHANGE IN PROBLEM
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			•	TY-ST-ZIP		7
TITLE		☐ DELETE	4.1 TIT			☐ Change ☐ Addition
NAME			4. 2 N/	IME		ĺ
STREET ADDRESS			4.3 \$1	REET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	5.1 TIT			Change Addition
NAME			5.2 NA	l		
STREET ADORESS				REET ADDRESS		
CITY-ST-ZIP		Driete		Y-ST-ZIP		District District
TITLE		☐ DELETE	6.1 TIT			☐ Change ☐ Addition
NAME OTDECT ADDRESS			6.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP		

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 his 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 officers.