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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026113

1. Corporation Name

CARSOF OF BROWARD, INC.

Principal Place	e of Business	Mailing Address				• • • • • • • • • • • • • • • • • • • •	,	
7604 S.W. 8TH	STREET	7604-S.W:-0TH-STREET	•	•	~ . a	ون بدخوبه د د	ماستن احو	<i>-</i>
NORTH LAUDER	RDALE FL 33068	north lauderdale f	L 33068					
						DO NOT WRITE IN THIS	SPACE	
				i	3. Date Incorporate 03/19/1996	d or Qualifed	:	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21	•	26			NOT APPLIC	ABLE	N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			- Cartifacta of Stol	tus Desired	\$8.75	Additional
22		27			5. Certifcate of Stat	lus Desileu []	· Fee R	Required
City & State	e .	City & State			6. Election Campai	gn Financing	\$5.00	May Be
23		28			Trust Fund Conti	ribution	Added	to Fees
Zip	Country	Zip	Co	untry	8. This corporation	owes the current year Inf	angible	
24	25	29	30		Personal Propert	ly Tax.	☐Yes	□No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Addr	ress of New Registered	Agent	
0.45	DULO OADLOO			81 Nam	•			
	RILLO, CARLOS		82 Street Ad			is Not Acceptable)	.	
7604 S.W. 8TH STREET			DZ Stiest At		radicas (r.o. box rambor	10 (10t) 1000piii.07		
NORTH LAUDERDALE FL 33068				83				
	•			84 City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florida Sta	atutes, the a	above-name	d corporation submits this stat	ement for the purpose of	changing it	s registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change wa	s authorize	d by the cor	poration's board of directors. I	hereby accept the appoi	ntment as r	egistered
agent, rai	m familiar with, and accept the oblic	gations of, Section 607.0505,	rionda sta	lules.				
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (N	OTE: Registere	d Agent signatur	required when reinstating)	DATE		
12.		AND DIRECTORS	13.			NGES TO OFFICERS AN	ID DIRECT	ORS IN 12
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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 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 attaghment with an address, with all other like empowered.

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90151 041 ***150.00