## 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 #

P96000036016 (9)

HUFECAR, CORP.

## FILED Feb 16 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address   |   |  |                   |  |
|---|---|--|-------------------|--|
| 1290 WESTON ROAD SUITE 300<br>FT LAUDERDALE FL 33326  |   | 1290 WESTON ROAD SUITE 300<br>FT LAUDERDALE FL 33326 |                   |  |
|   |   |  |                   | DO NOT WRITE IN THIS SPACE   |
|   |   |  |                   | 3. Date Incorporated or Qualified 04/25/1996                                       |
| 2. Principal Place of Business  |   | 2a, Mailing Address                                  |                   | 4, FEI Number Applied For  |
| 21  |   | 26   |                   | APPLIED-FOR 65-0810283 Not Applicable  |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.                                  |                   | 5. Certificate of Status Desired \$8.75 Additional                                 |
| 22  |   | 27   |                   | Fee Required   |
| City & State  |   | City & State   |                   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip   | Country                                   | Zip Co   | untry             | 8. This corporation owes or has paid the current year Intangible                   |
| 24  | 25  | 29 30  | <u> </u>          | Personal Property Tax due June 30. Yes No  |
| g. Name and Address of Current Registered Agent   |   |  |                   | 10. Name and Address of New Registered Agent                                       |
| LEGAL INFORMATION SERVICES (INC   |   |  | 81   Neegal       | l Information Services, Inc.   |
|   | GABLES BLVD                               | See Corrected infumation                             | 82 Signification  | の  |
| FT  | LAUDERDALE FL 33326                       | information  |                   |  |
|   |   |  | 83                |  |
|   |   |  | 84 CitWest        | con <b>FL</b> 85 333328  |
| 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 agont and title if applicable (NOTE Registered Agont signature required whon reinstating)  DATE  |   |  |                   |  |
| 12.   | OFFICERS AND                              | D DIRECTORS 13.                                      | ·                 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                  |
| TITLE   | D   | DELETE 1.11  | TITLE             | ☐ Change ☐ Addition  |
| NAME  | OCHOA, HUGO D                             | 1.2 f  | NAME              |  |
| STREET ADDRESS  | 146 GABLES BLVD                           | 1.3 :  | STREET ADDRESS    |  |
| CITY - ST - ZIP   | FT LAUDERDALE FL 33326                    |  | CITY-ST-ZIP       |  |
| TITLE   | 0   | DELETE 2.11  | titl <del>t</del> | ☐ Change ☐ Addition  |
| NAME  | OCHOA, FERNANDO D                         | 221  | NAME              |  |
| STREET ADDRESS  | 146 GABLES BLVD                           | 2.3 5  | STREET ADDRESS    |  |
| CITY-ST-ZIP   | FT LAUDERDALE FL 33326                    |  | CITY - ST - ZIP   |  |
| TITLE   | D CHOA CARLOS I                           |  | MILE              | Change Addition  |
| NAME  | OCHOA, CARLOS I<br>146 GABLES BLVD        |  | NAME              |  |
| STREET ADDRESS  | FT LAUDERDALE FL 33326                    |  | STREET ADDRESS    |  |
| CITY-ST-ZIP<br>TITLE  | FI LAUDENDALE FL 33320                    | 3.4.  DELETE 4.11                                    | CITY-ST-ZIP       | Change Addition  |
| NAME  | t   |  | NAME              |  |
| STREET ADDRESS  |   |  | STREET ADDRESS    |  |
| CITY-ST-ZIP   |   |  | CITY - ST - ZIP   |  |
| TIFLE   |   |  | TITLE             | Change Addition  |
| NAME  |   | •  | NAME              | ac lad   |
| STREET ADDRESS  |   |  | STREET ADDRESS    | 7/16/20  |
| CITY-ST-ZIP   |   |  | CITY - S1 - ZIP   |  |
| TITLE   |   | DELETE 6.11  |                   | Change Addition  |
| NAME  |   | 6.21   | NAME              | 100002431371   |
| STREET ADDRESS  |   | 6.3 5  | STREET ADDRESS    | -02/16/9801024022  |
| CITY-ST-ZIP   |   | 6.4 (  | CITY-S1-ZIP       | ***150.00  |
|   | earlify that the information contribed wi |  |                   | n Section 119.07(3)(i). Florida Statutes, I further certify that the information   |

14. Thereby 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 top receiver or fursive 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.

01011471107

HUGO TO DOLLOR

1/16/91

:R2E034 (10/97)