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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000045872

1. Corporation Name

AUTO SHUTTLE USA, INC.

Principal Place	of Business	Mailing Address			T INCHINGER UND GRUND MEHRE BERUT	I uu kki uu kki uukki uk	ee i gilgi egali e	
1900 NW 21ST		1900 NW 21ST AVE						
FT LAUDERDAL		FT LAUDERDALE FL 33311				(C) TE IN TUBO (DD 4 GE	
US		US .		2 Date	Incorporated or Qualife	RITE IN THIS S	SPACE	
				1	30/1996			
2. Principal Pl	ace of Business	2a. Mailing Address		1	Number		<u> </u>	lied For
21		26		65-	<u>0676000</u>			Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Cert	ifcate of Status Desired	-~- <u>-</u>	\$8.75 A	
City & State	е	City & State		6. Elec	tion Campaign Financir	 □	\$5.00 %	May Be
23		28		Trus	t Fund Contribution		Added to	Fees
Zip	Country	Zip	Country	8. This	corporation owes the c	current year Inta		_
24	25		30		sonal Property Tax.			□No
	9. Name and Address of Currer	nt Registered Agent			ne and Address of Nev	w Registered A	gent	
וועם	ADEC DATRICIA		81 Name	REDDIE	FINKELS	STEIN		
RHUADES, PATRICIA 732 NW 8 AVE			82 Street	Address (P.O. E	Box Number is Not Acce	eptable)		
	AUDERDALE FL 33311		<u> </u>	1-2-8 F	DAYVIEW	Circui	Σ	
FIL	MODEUDALE LE 30311		83					İ
			84 City	T LAUD	سي م	FL	85 Zip C	ode 526
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	e the above named	corporation sub	mits this statement for t	the purpose of o	changing its r	egistered
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autorious of, Section 607.0505, Flori	thorized by the corp. da Statutes.	oration's board of	or directors, i nereby ac	_	_	1216160
i	Tredelie Tinle	14			1	res 21	11999	
SIGNATURE-	Installed by Installed Ins	nt and title if applicable. (NOTE. F	Registered Agent signature i			DATE		
12.		ND DIRECTORS	13.	ADDI	TIONS/CHANGES TO	OFFICERS ANI		
TITLE	DPST	☐ DELETE	1,1 TITLE	}			Change	☐ Addition
NAME	RHOADES, PATRICIA A		12 NAME	1				Ì
STREET ADDRESS	1900 NW 21ST AVE		1.3 STREET ADDRESS	1 20	BANNEWCI	1203		
CITY-ST-ZIP	FT LAUDERDALE FL 33311		1.4 CITY-ST-ZIP	し ペナーン	1-17-4 N/M A		<u> </u>	
TITLE	P			_ ` ` _	AND EU DIE E			
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l	FINKELSTEIN, FREDDIE	☐ DELETE	2.1 TITLE 2.2 NAME				Change Change	☐ Addition
STREET ADDRESS	1900 NW 21ST AVE	☐ DELETE		12-28	BAYNOW	درود	Change	_
CITY-ST-ZIP	1900 NW 21ST AVE FT LAUD FL 33311		2.2 NAME	12-28		درود	Change	326
1	1900 NW 21ST AVE	□ DELETE	2.2 NAME 2.3 STREET ADDRESS	12-28	BAYNOW	درود	Change	_
CITY-ST-ZIP	1900 NW 21ST AVE FT LAUD FL 33311 VP MANNING, STEPHEN		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	12-28	BAYNOW	درود	Change	326
CITY-ST-ZIP	1900 NW 21ST AVE FT LAUD FL 33311 VP MANNING, STEPHEN 4950 NW 16 ST		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	17-28	BAYNOW	درود	Change	326
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14. 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 attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP