<b>*</b>	PLEASE RE	EAD ALL INST	RUCTION	ONS BEFORE C	OMPLET	ING THIS FO	RM.	,	
APPLICATION FLORID			A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State IVISION OF CORPORATIONS		Second Se				
DOCUMENT # P96000049433					97 NDV 26 PM 2: 35				
1. Corporation Name AUTO ACCESSORIES DEPOT, INC.					SECRETARY OF STATE TALLAHASSEE FLORIDA				
10720 W. FLAGLER ST. SUITE 8 BOX 32		10720 W. FLI SUITE 8 80)	Malling Address 10720 W. FLAGLER SI SUITE & BOX 32- MIAMI FL 33174 -						
7291 N.W. 3657 7			th Incorrect Information and enter correction below.  3. New Mailing Office Address, If Applicable  7 > 9 - N · W · S · S · S  Sulto, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 06/10/1996			
City & State City &			ve State miami, h.			67/627		Applied For Not Applicable	
Zip 33/	Country	Zip 331	·	Country V SA	6. CERTIFICAT	E OF STATUS DESIRED	\$8.75 Addition	onal Fee required icate of Status	
7. Names e	and Street Addresses of Each Offi		rida nonprofit	corporations must list at lea Street Address of Each		T			
Title(s) 1  Name of Officers and/or Directors 2			Officer and/or Director 3 (Do NOT Use Post Office Box I		lumbers) 4 City / State / Zip				
PD TABARES, MARIA				FLAGLER ST. SUITE 8 F INW3657					
			<u> </u>	<u> </u>					
					<u></u>				
,					3000023614636 -12/02/9701105011 -****165,00 ****165,00				
	8. Name and Address of C	Current Registered Age	ent		9. Name and	Address of New Regis	stered Agent		
SUITE	es, maria <del>West-flagler s</del> t. 8 <del>80</del> x 32 -	Street Address (P.O. Box Number Is Not Acceptable) 7295 W.W. 3 6 ST Suite, Apt. #, Etc.			CRZEGAO (8997)				
HIMAIM	FL-33174			سعر، رهو معر، المعر			State Zip Cox	166	
10. I, being Signature of Registered	appointed the registered agent of	HE GISTERE D AG	>	mijar with and accept the oc	oligations of Sect	Date ///	L <b>.</b> -5		
	is corporation owes angible Personal Pr	or has paid th	e currer	nt year	No 🗌	(See o	ther side for infor on intengible tax	(and )	
this rein: owed by	that I am an officer or director or t statement application, the reason the corporation have been paid a upplication is true and accurate ar	for dissolution has been and the names of Individ	eliminated, thuals listed on	e corporate name satisfies this form do not qualify for a	the requirements an exemption un	s of section 607,0401 of	617.0401, F.S.,	that all fees	
SIGNAT		OR PRINTED NAME OF	ALA SIGNING OFFICE	RUA IABA ER OR DIRECTOR	ARES	11/11/97 ()	W ) 49 9 - 6 Daylime Phor	991 10#	



## **AUTO ACCESSORIES DEPOT**

## \*AUTO & TRUCK ACCESSORIES\*

7295 N.W. 36 ST MIAMI FL 33166 TEL(305)599-8991 FAX(305)599-7082

November 16, 1997

## FLORIDA DEPARTMENT OF STATE

To whom it may concern:

Enclosed you will find the filled application and the payment for it. We are very sorry that we didn't send it before, but we moved our office and we never got the application. On next year since our new address is shown on the application, it will be on time.

Thank you for your understanding and your cooperation in this matter...

Sincerely,

MARIA TABARES
PRESIDENT