FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000059146

1. Corporation Name

CASTILLO C.V. JOINTS/AUTO CO.

Principal Place	e of Business	Mailing Address			, 188/188/ ((E 121/2 31/1 33/1) 38/1/ 38/1/
1038 N.W. 36 ST MIAMI FL 33127		1038 N.W. 36 ST Miami FL 33127			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 07/15/1996
Principal Place of Business 21		2a. Mailing Address	s		4, FEI Number 65-0796276
Suite, Apt. #, etc. 22 City & State 23		Suite, Apt. #, etc. 27 City & State 28			5. Certificate of Status Desired \$8. Fe
					6. Election Campaign Financing Trust Fund Contribution Ac
Zip	Country 25	Zip 29	Countr 30	y	This corporation owes the current year Intangible Personal Property Tax.
24	urrent Registered Agent	100		10. Name and Address of New Registered Agent	
MEJIA, MERCEDES D			8		t Address (P.O. Box Number is Not Acceptable)
	B N.W. 36 ST. MI FL 33127		8:	3	
}				City	85

FILED Jun 09, 1999 8:00 am Secretary of State

06-09-1999 90025 049 ***150.00



Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

	N.W. 36 ST.	82	Street Address (P.O. Box Number is Not Acceptable)							
MIAN	AI FL 33127	83								
		84	City		FL		Code			
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t egistered agent, or both, in the State of Florida. Such change was autho m familiar with, and accept the obligations of, Section 607.0505, Florida	orized by	the corporation s	tion submits this stater board of directors. I h	ment for the purpose of ereby accept the appoir	changing i ntment as i	ts registered registered			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regi	stered Agen	t signature required wh	en reinstating)	DATE					
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	PD DELETE	1,1 TITLE				Change	: Addition			
NAME	MEJIA, MERCEDES D	12 NAME								
STREET ADDRESS	1038 N.W. 36 ST	1.3 STREET	ADDRESS				ŀ			
CITY-ST-ZIP	MIAMI FL 33127	1.4 CITY-S	-ZIP							
TITLE		2.1 TITLE				Change	Addition			
NAME		2.2 NAME								
STREET ADDRESS		23 STREET	ADDRESS							
CITY-ST-ZIP		2. 4 CITY-S	T-ZIP							
TITLE	☐ DELETE	3.1 TITLE			•	Change	Addition			
NAME		3.2 NAME								
STREET ADDRESS		3.3 STREE	ADDRESS							
CITY-ST-ZIP		3.4. CITY-S	T-ZIP							
TITLE -	☐ DELETE	41 TITLE				Change	Addition			
NAME		4.2 NAME					ŀ			
STREET ADDRESS		4.3 STREE	ADDRESS							
CITY-ST-ZIP		4.4 CITY-S	T-ZIP							
TITLE	☐ DELETE	5.1 TITLE				Change	e			
NAME		5.2 NAME			•					
STREET ADDRESS		5.3 STREE	ADDRESS							
CITY-ST-ZIP		5.4 CITY-S	r-zip							
TITLE	DELETE	6.1 TITLE				☐ Change	e ☐ Addition			
NAME		6.2 NAME								
STREET ADDRESS		6.3 STREE								
CITY-ST-ZIP		6.4 CITY-S		440.07(0)(0)	I. Otal II. I E. III. I I I I I I I I I I I I I	tifir that the	information			
14. I hereby of	certify that the information supplied with this filing does not qualify for the	exempt and that	on stated in Sec t my signature s	tion 119.07(3)(I), Florid	ia Statules, i further cer al effect as if made unde	er oath; tha	at 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.

SIGNATURE: