## 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 # P96000064203 (8)

FIRST AUTO FINANCE CO.

**FILED** May 15 1998 8:00am Secretary of State

	•			
Principal Place of Business	Mailing Address		- 10041000 110 18410 04114 08411 08411 08411 08410	BUSS DIBID HOU EDSAF 1131 1581
790 E BROWARD BLVD	C/O ACCTG. & BUSINES	SS CONSULTANTS		
SUITE 302	790 E BROWARD BLVD.			
FT LAUDERDALE FL 33301	FT LAUDERDALE FL 333	01-2077	DO NOT WRITE IN TH	IS SPACE
	US		3. Date Incorporated or Qualified 07/30/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1445 MONTE LAKE	DR. 26 813 BLOOMIN	WALLS NOT	65-0683157	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27 301			Fee Required
City & State  23 VALRICO FL.	City & State BRAN 28 VALUE )	P& .	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Couritry	Zip 33571	Country	8. This corporation owes or has paid the	current year Intangible
24 33594 25 HILLSPY		30 HILLS BO ROXXH	Personal Properly Tax due June 30.	Yes No
<del></del>	of Current Registered Agent	81 Name	10. Name and Address of New Registers	d Agent
NICHOL, HOLLY D		81 Name		
790 E BROWARD BLVD		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
SUITE 302		83		
FT LAUDERDALE FL 3330	<b>/I</b>	63		
		84 City	F	
11. Pursuant to the provisions of Soction	ns 607.0502 and 607.1508, Ftorida Statut	es, the above-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered
agent. I am familiar with, and accep	t the obligations of, Section 607,0505, Fig	orida Statutes.	non's board or directors. I hereby accept the a	ppointment as registered
SIGNATURE				
		L: Registered Agent signature requir		
12. OF F	ICERS AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
Alloud House		1.1 TITLE		Change
NAME NICHUL, HULLY U STREET ADDRESS PO BOX 24654 N/A	•	1.2 NAME	3 BLOOMINGORUS AUF # 3	301
CITY-ST-ZIP FT LAUDERDALE FL				
TITLE	DELETE	1.4 CHY+S1+ZIP 8	NAWOON, FC. 335/1	Change Addition
NAME		2.2 NAME		C Stiange C Madition
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-\$T-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	4.4 CITY-ST-ZIP		
TITLE	L_] DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME DIDECT ADDRESS		5.2 NAME		İ
STREET ADDRESS		5.3 STREET ADDRESS		İ
CITY-ST-ZIP	DELETE	5.4 CITY - S1 - ZIP		[ ] (hans)
TITLE	(**) nere i p	6.1 TITLE		Change Addition
		6.2 NAMÉ		ļ
STREET ADDRESS		6.3 STREET ADDRESS		
14.   hereby certify that the information s	supplied with this filmo does not qualify to	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated on this annual report or sui	pplemental annual report is true and acc	urate and that my signatur	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and that	under eath: that I am an