

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF REVENUE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVAL
FILED

99 MAR 26 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000069173

1. Corporation Name

LEJEUNE Auto wholesale, inc.

Principal Place of Business

709 NW, LEJEUNE RD MIAMI, FL 33126
709 NW LEJEUNE RD MIAMI, FL 33126

2. Principal Place of Business

21 709 NW LEJEUNE RD 26 709 NW LEJEUNE RD

Suite, Apt #, etc.

Suite, Apt #, etc.

22 N/A 27 N/A

23 MIAMI, FL 28 MIAMI, FL

Zip

Country

Zip

Country

24 33126 25 USA 29 33126 30 USA

9. Name and Address of Current Registered Agent

Richard Brodeur
709 NW LEJEUNE RD
MIAMI, FL 33126

81 Name: Nicolas O Mendizabal JR
82 Street Address: 709 NW LEJEUNE RD
83 City: MIAMI FL 85 Zip Code: 33126

11. Pursuant to the provisions of Sections 607.0512 and 607.1505, Florida Statutes, the above named corporation is authorized to file this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change will apply to the corporation's term of existence. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] Nicolas O Mendizabal JR

03/24/99

12. OFFICERS AND DIRECTORS

TITLE	President	<input checked="" type="checkbox"/>
NAME	Richard Brodeur	
STREET ADDRESS	709 NW Lejeune Rd	
CITY-STATE-ZIP	MIAMI, FL 33126	
TITLE	Vice President	<input checked="" type="checkbox"/>
NAME	Richard Brodeur	
STREET ADDRESS	709 NW LEJEUNE RD	
CITY-STATE-ZIP	MIAMI, FL 33126	
TITLE	Treasurer	<input checked="" type="checkbox"/>
NAME	Richard Brodeur	
STREET ADDRESS	709 NW Lejeune Rd	
CITY-STATE-ZIP	MIAMI, FL 33126	
TITLE	Secretary	<input checked="" type="checkbox"/>
NAME	Richard Brodeur	
STREET ADDRESS	709 NW Lejeune Rd	
CITY-STATE-ZIP	MIAMI, FL 33126	

TITLE	[]	[]
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	[]	[]
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplement thereto 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 612, 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: [Signature] ELOY GARCIA JR

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****150.00 ****150.00

[Signature]

03/24/99 (305) 649-9922

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