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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # P96000069842 (8)

### GENERAL ACCESSORIES CORPORATION

## **FILED** Mar 04 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Ad-	Mailing Address 6215 SW 13TH ST.				I IDENIOSA NE ADAR BINI OSTA DONI EGNE BANG TOTAL PENA GLEID NEU IDEA			
6215 SW 13TH		_								
MIAMI FL 33144		MIAMI FL 33144-5603								
							3. Date Incorporated or Qualified 08/21/1996	3a. Dal	e of Last F	Report
2. Principal Pla	ace of Business	2a. Mailing	Address				4. FEI Number 65-069534	7		pplied For ot Applicable
Suite, Apt. #	#, etc		pt. #, etc.							Additional
22	•	27					5. Certificate of Status Desired			equired
City & State	)	City & S	State				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	Zip		Col	untry		8. This corporation has liability for it			s. 199.032,
24	25	29		30		<del></del>		Yes [		
	9, Name and Address of Curi	ent Registered Aç	ent		81	NI	10. Name and Address of New Re	istered A	gent	
	NANDEZ, GUILLERMO				"'	Name				
	SW 13TH ST.				82	Street Add	fress (P.O. Box Number is Not Acceptab	e)		-
MIAN	AI FL 33144				83					
					63					
					84	City	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	p= 1	<b>85</b> Zip	Code
					$oxed{oxed}$			FL	<u> </u>	
office or re	poistered agent, or both, in the Sta	ite of Florida, Such	change was	authorize	d by	the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of tithe appo	changing i pintment as	its registered registered
agent Lar	n familiar with, and accept the ob	igations of, Section	607.0505, F	lorida Sta	tutes	S.	,,			<b>3</b>
SIGNATURE .										
	Significe typed is panted hards of registered  OFFICE DC 7.	agent and title it applicable AND DIRECTORS	e (NC	TE Registere	ed Age	nt signature requ	ired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE EDG AND	DIRECTO	DC IN 12
12. THLE	DPT		DELETE	1,1 7	ITLE		ADDITIONS/CHANGES TO OFFIC	ENS AND	Change	Addition
NAVE	HERNANDEZ, GUILLERMO	'		1	MME	}			Onange	
STREET ADDRESS	6215 SW 13TH ST.					ADDRESS				
	MIAMI FL 33144					- 1				
CITY - \$1 - ZIP TITLE			DELETE	2.1 T	HTY-S	1-21			Change	☐ Addition
NAME			beech	2.2 M						
STREET ADORESS						ADDRESS		****		
						ST-ZIP				
CITY-ST-ZIP TITLE			DELETE	317		51-2IP			Change	Addition
NAME				321					<b>-</b> · · · • •	
STREET ADDRESS						ADDRESS				
City-St-Zi-				· ·		ST-ZIP				
TIFLE			DELETE		ITLE	/· LH		<del></del>	Change	Addition
NAME					NAME	l			_ ~	
STREET ADDRESS						ADDRESS				
City-St-ZiP					>TY-S					
TITLE			DELETE	511	_				Change	Addition
NAME					IAME	}			•	
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			DELETE		TITLE	1 4.0			Change	Addition
NAME				1	IAME				Ba	
<b>,</b>				- 1		ADDRESS				
STREET ADORESS										
14 Ldo here!	w certify that the information supp	lied with this filing	does not qua			T-ZIP	ed in Section 119.07(3)(i). Florida Statute	Lfurther	certify tha	t the

Too hereby deflay that the information supplied with this filling does not quality for the exemption stated in section 1.19.7(5)(f), honora statutes. 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 are 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.

HIGUILLERMO HERNANDEZ 2-25-97