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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Tas



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED May 17, 1999 8:00 am Secretary of State 05-17-1999 90082 050 ***150.00

DOCUMENT # P9600079479 1. Corporation Name P9600079479 AMAROX AUTO SAles & Repairs, In Principal Place of Business Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address 22805 2. Principal Place of Business Mailing Address 22805 23. Mailing Address 24. Mailing Address Suite, Apt. #, etc. 27.	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 9 - 25 - 96 4. FEI Number 59 - 340/886 Applied For Not Applicable
Principal Place of Business Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address DRIando, FL 32805 2. Principal Place of Business 1 1310 W CHURCHST Suite, Apt. #, etc. 27	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 9-25-96 4. FEI Number / Applied For
2. Principal Place of Business 1 1310 W CHURCH ST 2a. Mailing Address 1 1310 W CHURCH ST 26 Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 9 - 2 5 - 9 6 4. FEI Number / Applied For
2. Principal Place of Business 1310 W CHURCH S7 0Rlando, FL 32805 2. Principal Place of Business 11310 W CHURCH ST 26 Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 9 - 2 5 - 9 6 4. FEI Number / Applied For
ORlando, FL 32805 2. Principal Place of Business 1 1310 W CHURCHST 26 Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 9 - 2 5 - 9 6 4. FEI Number / Applied For
2. Principal Place of Business 1 1310 W CHURCHST 26 Suite, Apt. #, etc. 2 Suite, Apt. #, etc.	9-25-96 4. FEI Number / Applied For
1 1310 W CHURCH ST 26 Suite, Apt. #, etc. 27	4. FEI Number / Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc. 2 27	59-340/880 Not Applicable
27	
<u> </u>	5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State 28 City & State	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
$\frac{Zip}{32805}$ Country $\frac{Zip}{30}$ Country $\frac{Zip}{30}$	8. This corporation owes the current year Intangible Personal Property Tax.
9. Name and Address of Current Registered Agent 81	10. Name and Address of New Registered Agent
KAMARAIS Jawan	
8513 Clemans Lane 82 5	Street Address (P.O. Box Number is Not Acceptable)
ORlando, F1 32819 83	
	City FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-n	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-no office or registered agent, or both, in the State of Florida. Such change was authorized by the agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.	e corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE DILLOGA TO	5/10/99
Stgrature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent sig	gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. OFFICERS AND DIRECTIONS 13.	mahenda Samaro
NAME 1.2 NAME	3107 Blakely Rd VP/DIR
STREET ADDRESS 1.3 STREET ADD	100000
CITY-ST-ZIP 1.4 CITY-ST-ZII	
TITLE SEC-TREAS. DIR DELETE 21 TITLE VAME TO STRUMB B Jlawan STAYS the 22 NAME	Kaumond Jawan
	18C12 CLOIMATIN HUNG DIMIT
STREET ADDRESS 8513 Clematis Land 8Ame 23 STREET ADDRESS. OKlaudo, Fl 32819 24 CITY-ST-ZIP 24 CITY-ST-ZIP	0010 1 00 32 210
TITLE	Rex Jawan Change Addition
NAME 3.2 NAME	ODRESS 8513 Clemato Lane PIDIR ORando, Fl 32819
3.3 STREET ADDRESS	ORESS 000 0 10 10 20819
21Y-ST-ZIP 3.4.CIY-ST-ZI TITLE □ DELETE 41 TITLE	Change Addition
NAME 4, 2 NAME	
	DDRESS
FIREE ADDRESS 4.3 STREET AD.	IP
TITY- \$1-ZIP 4.4 CITY- \$1-ZIP TITLE DELETE \$.1 TITLE	Change Addition
A4 CITY-ST-ZIP	
### ##################################	DORESS
A4 CITY-ST-ZIP	DORESS
A4 CITY-ST-ZIP	DORESS IP
A4 CITY-ST-ZIP	DORESS IP Change Addition