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 # P96000088355 (8)

9. Name and Address of Current Registered Agent

MIAMI CARS & TRUCKS, INC.

AMERILAWYER CHARTERED 343 ALMERIA AVENUE

CORAL GABLES FL 33134

Principal Place	of Business	Mailing Address				
15403 SOUTHWEST 68 LANE MIAMI FL 33193		15403 SOUTHWEST 68 LANE MIAMI FL 33183-2110				
				3. Date incorporated or Qualified 10/25/1996	3a. Date of Last Report	
2. Principal Place of Business		2a. Mailing Add	dress	4. FEt Number	Applied For	
21	21			65-070414	Not Applica	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	7ip	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032 Yes No	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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City

SIGNATURE	Signature, typed or printed name of registered agent and title if ap	767		required when rejectations) DATE	
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- 6
TITLE	PID	☐ DELE1E	1.1 1/TLE	☐ Change ☐ Addition	, {
NAME	SILVA, MAYLIN		. 1.2 NAME		3
STREET ADDRESS	15403 SOUTHWEST 68 LANE		1.3 STREET ADDRESS		Ì
CITY-ST-ZIP	Miami FL 33193		1.4 C(1Y - \$1 - ZIP		Š
TITLE	V\$D	DELETE	21 TITLE	Change Addition	1
NAME	ARIAS, DANILO		2.2 NAME		
STREET ADDRESS	15403 SOUTHWEST 68 LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33193		2.4 CITY-ST-ZIP		1
TITLE		DELETE	3 1 TITLE	Change Addition	ĭ
NAME			3 2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE	Change Addilion	\Box
NAME			4. 2 NAME		ı
STREET ADDRESS			4.3 STRFET ADDRESS		- [
CITY-ST-ZIP			4.4 CHY- \$1 - 7IP		
TITLE		☐ DELETE	5.1 TITLE	Change Addition	1
NAME			5.2 NAME		
STREET ADDRESS			5.3 \$1REE1 ADDRESS		
CITY-ST-ZIP			54 CITY - ST - ZIP		
TITLE		DELETE	6.1 1/TLE	☐ Change ☐ Addition	١]
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADURESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I 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 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 13 if chapter 6, or or or an attachment with an address.

04/28/91

FILED

May 15 1997 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Zip Code