

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 28 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000089419 (1)
 1. Corporation Name

AUTOMOTIVE EQUIPMENT GROUP, INC.



Principal Place of Business: 18524 N.W. 67 AVE #168 MIAMI FL 33015
 Mailing Address: 18524 N.W. 67 AVE #168 MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business
 1843 N.W. 93rd Ave.

26 2a. Mailing Address
 1843 N.W. 93rd Ave.

3. Date Incorporated or Qualified
 10/28/1996

4. FEI Number: 65-0733820
 Applied For: Not Applicable

22 Suite, Apt. #, etc.
 None

27 Suite, Apt. #, etc.
 None

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 City & State
 Miami, Florida

28 City & State
 Miami, Florida

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip: 33172
 25 Country: U.S.A.

29 Zip: 33172
 30 Country: U.S.A.

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

MARRERO, RUTH E
 6220 N.W. 173 ST #734
 MIAMI FL 33015

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, 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.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MARRERO, RUTH E	
STREET ADDRESS	6220 N.W. 173 STREET #734	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	MARRERO, MANUEL E	
STREET ADDRESS	6220 NW 173 ST. #734	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	200002650952
5.4 CITY-ST-ZIP	-03/29/98--01014--013 ***150.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

01/16/98

CR2E034 (5/98)

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Automotive Equipment Group, Inc.
1843 N.W. 93rd Ave.
Miami, FL 33172

September 14, 1998

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Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500


Re: EIN# 65-0733820
Document # P96000089419 (1)

Dear Sirs:

Enclosed is my Profit Corporation Annual Report for 1998 along with a check in the amount of \$150.00. I did not receive the original annual report form and was unaware that I had to file a corporate annual report. Kindly abate all penalties for late filing.

Should you have any questions do not hesitate to contact me at (305) 557-1271

Sincerely,


Ruth Marrero

Enclosures