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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTME

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000093526 (7)

AUTO MOBILE WINDOW TINTING, INC.

Mar 16 1998 8:00am Secretary of State

FILED

|--|--|

Fillicipal Flace	a or programos	Mailing Modress			
601 82ND STI	REET	2769 ARROWWOOD CT	•		
#4 Miami Beach	EL 22141	DAVIE FL 33328		DO NOT WRITE IN T	HIS SPACE
MINMI DENON	FL 33141			3. Date Incorporated or Qualified	THO OF AGE
				11/12/1996	
2 Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	add of Eddinion	26 601 82 5	it-	65-0709320	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.	<u> </u>		\$8.75 Additional
22	7, 0.0	27 +44		5. Certificate of Status Desired	Fee Required
City & State	9	City & State	·····	6. Election Campaign Financing	\$5.00 May Be
23		28 MIAMIA	SEACH, FL	Trust Fund Contribution	Added to Fees
Zip	Country	Z(p)	Country	8. This corporation owes or has paid the	
24	25	29 33141	30 USA	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Currer		1991	10. Name and Address of New Registe	
RAJ	MIREZ, ERIK		81 Name		
	82ND STREET		20 0	(0.0.0.1)	
#4	CONTROL CONTROL		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	MI BEACH FL 33141		83		
in the	UNI DESCRITE GOTAT				
			84 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607 050	12 and 607 1508 Florida State	utos the above-named cor		
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized by the corpore	rporation submits this statement for the purpo ation's board of directors. I hereby accept the	appointment as registered
agent I a	m familiar with, and accept the oblig-	ations of, Section 607,0505, I	lorida Statutes.		
SIGNATURE	Stgnature, typed or printed name of registered age		DIE Registered Agent signature requ	uired when reinstating) DA	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	
TOTLE	PO	DELETE	1.1 TITLE	ACCITIONO/OF ANY CLE TO OFF TOLERO	Change Addition
NAME	RAMIREZ, ERIK		1.2 NAME		
STREET ADDRESS	601 82ND STREET, #4		1.3 STREET ADDRESS		
CRTY-ST-ZIP	MIAMI BEACH FL 33141				
TITLE	TD	DELETE	1.4 CITY - ST - ZIP 2.1 TiTLE		Change Addition
NAME	RAMIREZ, RUDY	Ditter.	2.2 NAME		
	2769 ARROWHEAD CT.				
STREET ADDRESS	DAVIE FL 33328		2.3 STREET ADDRESS		
CITY-ST-ZiP	DATIL TE 33320	DELETE	2 4 CITY - ST - ZIP		Change Addition
TITLE		ר"ו מנונונ	3.1 TITLE		☐ cwarge ☐ vocation
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Doreta	3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	v	
CITY - ST - ZIP		<u></u>	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied w	ith this filma does not qualify		n Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information

14. Thereby 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 changer[, or or an attachment with an address.]

SIGNATURE:

Cuk R. Hourse

3-9-98 (305) 486-4239