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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandre B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P9700005632 (9)

| ASTRO AUTO SALES COR                   | ·                                      |  |  |  |
|--|--|--|--|--|
| Principal Place of Business            | Mailing Address                        | DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  |  |  |
| 10502 S.W. 145 COURT<br>MIAM1 FL 33186 | 10502 S.W. 145 COURT<br>MIAMI FL 33186 |  |  |  |
|  |  | 01/21/1997   |  |  |
| 2. Principal Place of Business         | 2a. Mailing Address                    | 4. FET Number Applied For OS-07/96 14 Not Applied  |  |  |
| Suite, Apt. #, etc.                    | Suite, Apt. #, etc.                    | 5. Certificate of Status Desired S8.75 Additional Fee Required   |  |  |
| City & State                           | City & State                           | Election Campaign Financing     Trust Fund Contribution     Added to Fees                                      |  |  |
| Zip Country                            | Z(I) Country<br>29 30                  | 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            | 10. Name and Address of New Registered Agent   |  |  |

GONZALEZ, REINALDO 10502 S.W. 145 COURT **MIAMI FL 33186** 

|      |  | 6  | <ol><li>Election Campaign Financing<br/>Trust Fund Contribution</li></ol> |            |               | May Be<br>Ho Fees |  |
|------|--|----|---|------------|---------------|-------------------|--|
| ount | ry   | 8  | B. This corporation owes or has<br>Personal Property Tax due Ju           |            | rent year l   | ntangible<br>No   |  |
| Т    |  | 10 | 0. Name and Address of New  | Registered | Agent         |                   |  |
| 8    | 1 Name   | 9  |   |            |               |                   |  |
| В    | 2 Street Address (P.O. Box Number is Not Acceptable) |    |   |            |               |                   |  |
| 8    | 3  |    |   | ·          | <del></del> - |                   |  |
| 8    | 4 City   |    |   |            | 85 Zir        | Code              |  |

**FILED** 

Apr 29 1998 8:00am

Secretary of State

Applied For Not Applicable

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 Statu 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            | Signature, lyped or printed name of registered agent and I | du d'acceptant la MAZOT | E Spaintand Agant signah va sagu   | ired when reinstating) DATE |             |
| 12.                  | OFFICERS AND DIR   |                         | [F Registered Agent signature required when reinstating) DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |                             |             |
| TOLE                 | PD   | DELETE                  | 1.1 TITLE  | Change                      |             |
| NAME                 | GONZALEZ, REINALDO   | —                       | 1.2 NAME   | _ ·                         | _           |
| STREET ADDRESS       | 10502 S.W. 145 COURT                                       |                         | 1.3 STREET ADDRESS   |                             |             |
| CITY-ST-2IP          | MIAMI FL 33186   |                         | 1.4 CITY-ST-ZIP  |                             |             |
| TITLE                | VD   | DELETE                  | 2.1 TITLE  | Change                      | Additio     |
| NAME                 | GONZALEZ, ROSA M   | <u></u>                 | 2.2 NAME   | Lind Charge                 |             |
| STREET ADDRESS       | 10502 S.W. 145 COURT                                       |                         | 2.3 STREET ADDRESS   |                             |             |
| ì                    | MIAMI FL 33186   |                         | 2 4 CITY - ST - ZIP  |                             |             |
| CITY-ST-ZIP<br>TITLE | MINWELL 00 100   | DELETE                  | 3.1 TITLE  | Change                      | Additio     |
| NAME                 |  |                         | 3.2 NAME   |                             |             |
| !                    |  |                         |  |                             |             |
| STREET ADDRESS       |  |                         | 3.3 STREET ADDRESS   |                             |             |
| CITY-ST-ZIP          |  | DELETE                  | 3 4. CITY-ST-ZIP   | Change                      | Additio     |
| TITLE                |  | ☐ DECEIE                | 4.1 TITLE  | Change                      | : LI ADDINO |
| NAME                 |  |                         | 4. 2 NAME  |                             |             |
| STREET ADDRESS       |  |                         | 4.3 STREET ADDRESS   |                             |             |
| CITY - ST - ZIP      |  |                         | 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                      | Additio     |
| NAME                 |  |                         | 6.2 NAME   |                             |             |
| STREET ADDRESS       |  |                         | 6.3 STREET ADDRESS   |                             |             |
| Arr. 12 20           |  |                         | C 4 61711 67 710   |                             |             |

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 12 or Block 13 if changed or or an attack from with an address.

3/7/98