SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000030423 (2)

UNITED AUTOMOTORS CORP.

Principal Place of Business Mailing Address

FILED Oct 07 1998 8:00am Secretary of State

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2730 NORTHWEST 21 TERRACE MIAMI FL 33142			2730 NORTHWEST 21 TERRACE MIAMI FL 33142				DO NOT WRITE IN THIS \$ PACE		
							3. Date Incorporated or Qualified 04/03/1997		
2. Principal Place of Business				. Mailing Address			4. FEI Number Applied For		
21				26			65-0740453 Not Applicable	le	
Suite, Apl. #, etc.				Suite, Apt. #, etc.			5. Certificate of Status Desired Security Securi		
City & State			28	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country 25			Zip	Zip Count		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
		nd Address of Curren	t Regis	stered Agent			10. Name and Address of New Registered Agent		
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134						83 343	gel & Utrera, P.A. d/b/a AmeriL ess (P.O. Box Number is Not Acceptable) Almeria Avenuie	awy(
		. //	$I \Delta$			Cor.	al Gables Florida FL 33134		
11. Pursuant to the provisions of sections 60 050 and 07.1508, Florida Statutes, the						ove-named corpor	ration submits this statement for the purpose of changing its registered		
oπice or a	regist ere o agei Pr <u>n fami</u> llar with	nt, or both / in the State 1, and accept the obliga	ot Flori	ida. Such change was of, section 607.0505, Fi	autnorize Iorida Sta	i by the corporation	on's board of directors. I hereby accept the appointment as registered		
11. Pursuant to the provisions of sections 60/ 050/ Find 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both /n 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 optimized of, section 607.0505, Florida Statutes. SIGNATURE SIGN									
	Signature, typed to	printed have of registered agen		If applicable	ne <u>a</u> elsi	2000 TTTET	ived what Buildings To	ା ଚ	
12.		OFFICERS AN	D DIRE		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	18	
TITLE	PSTD Mendoza,	WONNE		DELETE	1.1 T		Change Additio	u 🚓	
NAME			r		1.2 N/			8	
STREET ADDRESS	IREET ADDRESS 2730 NORTHWEST 21 TERRACE MIAM! FL 33142			1.3 \$7		REET ADDRESS		CR2E034 (5/98)	
CITY-ST-ZIP	MIAMI FL 3	3192				Y-ST-ZIP		¹ 5	
TITLE				DELETE	2.1 TI	1	Change Additio	n _	
NAME					2.2 N/	ME			
STREET ADDRESS					2.3 ST	REET ADDRESS			
CITY-ST-ZIP				-		Y-ST-ZIP			
TITLE				DELETE	3.1 TF		Change Additio	n	
NAME					3.2 NA		•		
STREET ADDRESS					3.3 ST	REET ADDRESS			
CITY-ST-ZiP	 			— 		Y-ST-ZIP			
TITLE				DELETE	4.1 T		Change Additio	n	
NAME					4,2 NA				
STREET ADDRESS					4.3 S1	REET ADDRESS			
CITY-ST-ZIP						Y-ST-ZiP			
TITLE				DELETE	5.1 TI	ŀ	Change Addition	n	
NAME					5.2 NA	ME			
STREET ADDRESS					5.3 ST	REET ADDRESS			
CITY-ST-ZIP						Y-ST-ZIP		_	
TITLE				DELETE	6.1 TIT	LE	Change Additio	n	
NAME					6.2 NA	ME			
STREET ADDRESS					6.3 ST	REET ADDRESS			
CITY-ST-ZIP	_				6.4 CF	Y-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)(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 on an attachment with an address.

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