#### SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550:(IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT CORPORATION** ANNUAL REPORT

1999

SIGNATURÉ:



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

### **DOCUMENT #** P97000043812

VILLA USED AUTO SALES, INC.

# FILED Aug 17, 1999 8:00 am Secretary of State

08-17-1999 90001 017 \*\*\*150.00

|  |  |  |   |   |                        | 13 18181 11818 1181 1881    |
|--|--|--|---|---|------------------------|-----------------------------|
| _Principal Place   | of Business  | Mailing Address  | ال ما ريم، المحاصليات الد   |   |                        |                             |
| 2744 NUMILLA DR<br>ORLANDO FL 32839  |  | 2744 NUMILLA DR<br>ORLANDO FL 32839  | •   |   | E IN THIS SPAC         |                             |
|  |  |  |   |   | IN THIS SPAC           | ·Œ                          |
|  |  |  |   | 3. Date Incorporated or Qualified 05/14/1997                  |                        |                             |
| 2. Principal Pla   | ace of Business  | 2a. Mailing Address  |   | 4. FEI Number   |                        | Applied For                 |
| 21   |  | <b>⊢</b> ¬   | 26  |   |                        | Not Applicable              |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.  |   | 59-3445479 5. Certificate of Status Desired                   |                        | .75 Additional              |
| 22   |  | 27   |   | 3. Certificate of Status Desired                              | F                      | ee Required                 |
| City & State   |  | City & State   |   | 6. Election Campaign Financing                                |                        | 5.00 May Be                 |
| 23   |  | 28   |   | Trust Fund Contribution                                       |                        | dded to Fees                |
| Zip  | Country  | Zip  | Country   | 8. This corporation owes the current                          | ntyear<br>☐ Yes        | ☐ No                        |
| 24   | 25 Name and Address of   | 29 Current Registered Agent  | [30]  | Intangible Personal Property.  10. Name and Address of New Re |                        |                             |
|  | o, name and Addition of  | Carrent Registeres 1.50m   | 81 Name   |   | <u> </u>               |                             |
| AVESCAT, VILLA J   |  |  | 92 Ctract Ada   | tone (B.O. Bey Number in Not Acceptable                       | lo)                    |                             |
| 2744 NUMILLA DR  |  |  | 82 Street Add   | dress (P.O. Box Number is Not Acceptable                      | ie,                    |                             |
| ORLA   | NDO FL 32839   |  | 83  |   |                        |                             |
|  |  | i .  | 84 City   | ·   | 85                     | Zip Code                    |
|  | ** -   | ı  | O4 City   | 4.  | FL  °°                 | 21p 000e                    |
| 11. Pursuant t   |  |  | authorized by the corneral  |   | the appointment        |                             |
| office or re<br>agent, I ar<br>SIGNATURE   | egistered agent, or both, in in<br>m familiar with, and accept the<br>Signature, typed or printed name of agis | te State of Florida. Such change was to obligations of section 607.0505, F | authorized by the corporal<br>lorida Statutes.  NOTE: Registered Agent signature re-  |   | the appointment        |                             |
| office or re<br>agent, I ar<br>SIGNATURE   | Signature, typed or printed name of agis   |  | authorized by the corporal lorida Statutes.   |   | DATE                   |                             |
| office or reagent. I an SIGNATURE  | Signature, typed or printed name of typis OFFICE   | stered gent and title if applicable. (N                                    | authorized by the corporal lorida Statutes.  NOTE: Registered Agent signature re-   | quired when reinstating)                                      | DATE CERS AND DIR      |                             |
| office or reagent. I an SIGNATURE  | Signature, typed or printed name of ordis<br>OFFICE<br>PTD<br>AVESCAT, VILLA J                                 | tered gent and title if applicable. (N                                     | authorized by the corporal lorida Statutes.  NOTE: Registered Agent signature research  | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12                |
| office or reagent. I an SIGNATURE  | Signature, typed or printed name of orgin<br>OFFICE<br>PTD<br>AVESCAT, VILLA J<br>2744 NUMILLA DR              | tered gent and title if applicable. (N                                     | authorized by the corporal lorida Statutes.  NOTE: Registered Agent signature re  13.  1.1 TITLE  | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12                |
| office or reagent, I an SIGNATURE  | OFFICE PTD AVESCAT, VILLA J 2744 NUMILLA DR ORLANDO FL 32839   | RS AND DIRECTORS  DELETE   | authorized by the corporal ilorida Statutes.  NOTE: Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12 ange Addition  |
| office or reagent. I as SIGNATURE  | OFFICE PTD AVESCAT, VILLA J 2744 NUMILLA DR ORLANDO FL 32839 VSD   | tered gent and title if applicable. (N                                     | authorized by the corporal ilorida Statutes.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE   | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12                |
| office or reagent. I as SIGNATURE  | OFFICE PTD AVESCAT, VILLA J 2744 NUMILLA DR ORLANDO FL 32839 VSD AVESCAT, CLAUDETTE                            | RS AND DIRECTORS  DELETE   | authorized by the corporal ilorida Statutes.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME  | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12 ange Addition  |
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| office or reagent. I are agent. | PTD AVESCAT, VILLA J 2744 NUMILLA DR ORLANDO FL 32839 VSD AVESCAT, CLAUDETTE 2744 NUMILLA DR                   | RS AND DIRECTORS  DELETE   | authorized by the corporal lorida Statutes.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE   | quired when reinstating)                                      | DATE CERS AND DIR      | ECTORS IN 12 ange Addition  |
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RECORE

## Le06234-90001-17 P97000043812

August 10, 1999

Florida Dept of Sate
Division of Corporations
PO Box 1500
Tallahassee FL 32302

Dear Sir:

The attached 2<sup>nd</sup> Notice for the 1999 Corporate Annual Report for Villa Used Auto Sales, Inc. is the only notice received.

We have no record of receipt of the normal first notice. The correct address of the corporation is 2744 Numilla Drive, Orlando FL 321839, as shown of last year's report and this year's report.

Please waive the late fees and accept the normal payment of \$150.00 for the 1999 fee for Villa Auto Sales.

Yours truly:

Villa/J. Avescat

President

Villa Used Auto Sales, Inc.