PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POZOCOCEOZZZ

1. Corporation RODRIGI	uez & G. Japan Auto Wo	ORLD, INC							
Principal Place of Business Mailing Address							-		
2375 E. 10 AVE. 2375 E. 10 AVE.									
HIALEAH FL 33013 HIALEAH FL 33013						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	-		1
						06/06/1997			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For	
21 28						65-0760603	No	t Applicable	l
Suite, Apt. #, etc. Suite, Apt. #, etc.						5 Certificate of Status Desired	\$8.75	Additional	l
22	27				5. Certificate of Status Desired	Fee Re	equired .		
City & State	a	City & State				6. Election Campaign Financing	\$5.00	May Be	(
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zlp				8. This corporation owes the current year intangible			
24	25	29:	30			relativation to the second sec] Yes	XNo	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Ag	ent		Į.
000	DIOLIEZ ADMANDO			81	Name				į
RODRIGUEZ, ARMANDO				82	Street Addr	ess (P.O. Box Number Is Not Acceptable)			İ
78 W. 50 ST.			i			<u> </u>			
HIAL	EAH FL 33012			63					{
				84	City		85 Zip (Code	l
					•	FL.			!
11. Pursuant office or n agent. I a	m ramiliar with, and accept the colliga	Baris OI, Section 007.0003, From	28 SQL	1100.		oration submits this statement for the purpose of char's board of directors, I hereby accept the appointr	nent as re	gislered	
The state of the s				egistered Agent signature require 13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	8
12.	DP DELETE		1.1 TITLE				Change	Addition	CR2E034 (11/98)
NAME	RODRIGUEZ, ARMANDO			1.2 NAME					2
)	1 iii iii ii		1.3 STREET ADDRESS		nnerss				
STREET ADDRESS	HIALEAH FL 33012			14 CITY-ST-ZIP					ង្ក
CITY-ST-ZIP	DV	☐ DELETE	2.1 TITLE		-		Change	Addition	Ö
1	171			22 NAME					ł
NAME STREET ADDRESS	GONZALEZ, LUIS E ADDRESS 1687 W 59 ST.		2.3 STREET ADDRESS		nneess				l
1 :	RESS 1007 W 39 31.		2.4 CITY-ST-ZIP						l
CITY-ST-ZIP	DELETE		_	3.1 TITLE			Change	Addition	i .
NAME			3.2 N						l
STREET ADDRESS			1		DORESS				
!					· 1				}
Crty-St-Zip			_	3.4. CITY-ST-ZIP			- Change -	Addition.	
NAME			4. 2 NAM		.]				
STREET ADDRESS			•		DORESS				}
CITY-ST-ZIP			1	TY-ST-Z	ſ				
TILE			5.1 TI				Change	☐ Addition	
NAME			5.2 NA	ME.					
STREET ADORESS	+		5.3 ST	REETA	DORESS				
CITY-ST-ZIP	ESS.		5.4 CT	5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TI	î.E			Change	☐ Addition	
NAME	 	<u> </u>	6.2 NA	ME	Ţ				
STREET ADOPTOR					DORESS				1

14. I hereby certify that the information supplied with this filing does not quality 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 angual 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 507. Florida Statutes; and that my name appears in Block 12 or Block 13 if changled, or on an attachment with an address, with all other like empowered. LUIS E. GONZALEZ

6.4 CITY-5T-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

FILED

Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90081 031 ***150.00

L