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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700061693

1. Corporation Name

ALL FLORIDA DRIVER IMPROVEMENT SCHOOL CENTRAL IN

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90074 013 ***150.00



U.	•							
Principal Place	e of Business	Mailing Address	•			J. 11414 4 1111	, , , , , , , , , , , , , , , , , , , ,	
3800 N.W. 11TH STREET 3800 N.W. 11TH STREET MIAMI FL 33126 MIAMI FL 33126					DO NOT WRITE IN THIS SPACE			
•	•				3. Date Incorporated or Qualifed	-		
•					07/16/1997			
Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For	
21 26					65-0769246	N.	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					_	\$8.75	Additional	
27					5. Certificate of Status Desired	Fee R	equired	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
23					Trust Fund Contribution	Added	to Fees	
Zip					8. This corporation owes the current year Intangible			
24	25	29 30	-	4 - 4 - 4.	1 dibbliari repetty	Yes	□No	
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Registered Ag	jent		
				81 Name RANDY EGUES				
-COTO, WILFREDO			82		ess (P.O. Box Number is Not Acceptable)			
3800 N.W. 11TH STREET								
MIAN	MI FL 33126		83					
	•		84	City		85 Zip	Code	
				1	F <u>L</u> }		Ì	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, the	e abov	e-named corpo	oration submits this statement for the purpose of chin's board of directors. I hereby accept the appointment	anging its	s registered	
office or n	egistered agent, of both, in the State m familiar with and accept the utilities	of Florida. Such change was author: tions of Section 607.0505. Florida S	zed by tatutes	tne corporatio	in's board of directors. I hereby accept the appoint	Hent as it	3glatered	
/	1016/	RANDY	ΕG	UES RI	ESIDENT AGENT 1-19 '	99	1	
SIGNATURE	Signature, typed or printed the or registered age			nt signature required				
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	P	DELETE 1.	.1 TITLE		L	Change	☐ Addition	
NAME	EGUES, RANDY	1.	.2 NAME				į	
STREET ADDRESS	3800 N.W. 11TH STREET	1.	3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL 33126		4 CITY-S	T-ZIP				
TITLE	V	DELETÉ 2.1 TIT			Į	Change	Addition	
NAME	EGUES, VIVIAN 22 NA		2 NAME				1	
, STREET ADDRESS	3800 N.W. 11TH STREET	2	.3 STREE	T ADDRESS			\ \	
CITY-ST-ZIP	MIAMI FL 33126	2	. 4 CITY-5	ST-ZIP				
TITLE		☐ DELETE 3.	,1 TITLE	ì		Change	Addition	
NAME	·	3	.2 NAME				\ \	
STREET ADDRESS		3	.3 STREE	TADDRESS			.)	
CITY-ST-ZIP			.4. CITY-5	ST-ZIP				
TITLE		☐ DELETE 4	1 MILE		ا عنام المنظم	Change	_ Addition	
NAME		4	. 2 NAME		· .		1	
STREET ADDRESS		4	.3 STREE	TADORESS				
CITY-ST-ZIP	· · ·	4	4 CITY-S	T-ZIP				
TITLE		☐ DELETE 5	.1 TITLE		I	Change	☐ Addition	
NAME		5	2 NAME	1				
STREET ADDRESS		5	.3 STREE	TADORESS			Ì	
CITY+ST+ZIP	,		4 CITY- S	T-ZIP				
TITLE		☐ DELETE 6	1 TITLE		I	Change	Addition	
NAME		. 6	2 NAME	-				
STREET ADDRESS)	ŧ	.3 STREE	T ADDRESS	•		1	

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

QURANDÝ EGUES RINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

1-19 99