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 # P97000064783

1. Corporation MR. CAF	R AUTO SALES, INC.	,004700		
Principal Place	of Business	Mailing Address		I (\$50(60) is fall (\$50) dall said said said said side said said
3799 NW 36TH	ST.	3799 NW 36TH ST.		
MIAMI FL 33142 MIAMI FL 33142				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/28/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0771674 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Status Desired Status Desired
22		27		Fee Required
City & State	e · · ·	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes □ No
24	25	29 30	0	Personal Property Tax. Yes LINO 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Registered Agent	81 Name	
CHE	RRA. GEORGINA			JOSE B. MONGE VARGAS
3020 SW 134TH COURT			82 Street	Address (P.O. Box Number is Not Acceptable)
MIAMI FL FL331-75			83	797 NW 36/X 3/
· · · · · · · · · · · · · · · · · · ·	11 12 1200 170			· · · · · · · · · · · · · · · · · · ·
			84 City	M/AM/ FL 85 Zip Code 33/42
	40 - 007 007	00 and 007 4509. Florida Platitica	the above named	corporation submits this statement for the purpose of changing its registered
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 State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	la Statutes.	02/2./20
SIGNATURE	+ for 13.	Monge	egistered Agent signature re	whited when rejectation)
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE	
NAME	GUERRA, GEORGINA	, ,	1.2 NAME	JOSE B. MONEE VARGAS
STREET ADDRESS	3020 SW 134TH COURT		1.3 STREET ADDRESS	5240 NW Z STEET
	MIAMI FL 33175		1.4 CITY-ST-ZIP	JOSE B. MONEE VARGAS 5240 NW Z STREET MIAMI FL 33/2V
CITY-ST-ZIP TITLE	DS DS	☐ OELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BLANCO, FELIX J		2.2 NAME	
STREET ADDRESS	7881 W 29TH WAY, APT. 101		2.3 STREET ADDRESS	, `
	HIALEAH FL 33016		2,4 CITY+ST-ZIP	·
CITY-ST-ZIP TITLE	THALEFUTTE GOOTS	☐ D€LETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	•
CITY-ST-ZIP			34 CITY-ST-ZIP	·
TITLE		☐ DELETE	4.1 TITLE	Change Addition
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 ☐ Addition
			62 NAME	

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.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/99 (301) 633-/6/3
Davigne Phone #

FILED

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90111 016 ***150.00

:R2E034 (11/98)