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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000068027 (6)

JHC AUTO SALES IMPORT AND EXPORT, INC.

FILED Jan 30 1998 8:00am Secretary of State

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| | : | | | | | | | | | |
|---|---|---|-------------|-------------------|--|----------------------|----------------|--|---------------------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | | | | |
| 2198 NW 17TH STREET 2198 NW 17TH ST | | | | | | EET | | | | |
| #7 | | | | | #7 | | | DO MOT WOLTE IN THIS COACE | | |
| MIAMI FL 33125 | | | | | MIAMI FL 33125 | | | DO NOT WRITE IN THIS SPACE | | |
| | : | | | | | | | 3. Date Incorporated or Qualified 08/06/1997 | | |
| - | Principal Pl | - | | | a. Mailing Address | | | 1 1 1 mm = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Applied For | |
| 21 | : | | | 26 | <u>, </u> | | | | Not Applicable | |
| 22 | | ite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired Fee Required | | |
| | Oity & State | & State | | | City & State | | | | D May Be | |
| 23 | : | | | | | | | | to Fees | |
| _ | Zip | | Country | } | Zip | Coun | try | 8. This corporation owes or has paid the current year t | | |
| 24 | | - 11 | 25 | 29 | | 30 | | Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent | No. | |
| | + - | | | of Current Regist | ereo Agent | | 31 Name | | | |
| | | ASTILLO, | | | | | | MARIA T. ROJAS | | |
| | i | | TH STREET | | | | | ddress (P.O. Box Number is Not Acceptable) | | |
| | | 17 | | | | | | 198 NW 17 ST. NO 7 | | |
| | ; M | AIAMI FL 3: | 3125 | | | [| 20 | | | |
| | | | | | | 1 | 34 City | Minmy FL 3: | Code 3125 | |
| 11. | 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered pffice 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 | | | | | | | | | |
| | pffice or registered agont, or both, in the State of Floridal Such change was authorized by the corporation's board of orectors. Thereby accept the appointment as registered specific and accept the obligations of Section 607,0505. Florida Statules. | | | | | | | | | |
| SIGNATURE OFFICE 1/20/98 | | | | | | | | | | |
| Storuture, typed or printed name of register degrated and the if applicable (NOTE Registe | | | | | | | Agent signatur | re required when reinstating) DATE | | |
| 12. | - | () ₆₀ | OFFI | CERS AND DIREC | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO | | |
| TITL | | PD | | | ⊠ DEL€T E | 1.1 TITL | | | L.J Addition | |
| NAM | IE | | LLO, JOSE H | | | 1.2 NAN | | | | |
| STRE | EET ADDRESS | | NW 17TH STI | REEI, NO. / | | | EET ADDRESS | | | |
| 1 | -ST-ZIP | | FL 33125 | | DELETE | | r-\$1-ZIP | Change | Addition | |
| TITL | | SD ST | 544450 | • | DELETE: | 2.1 TITL | | Change | L Addition | |
| NAM | | CASTILLO, RAMIRO 9050 N.W. 31ST AVENUE | | | | 2.2 NAN | | | | |
| STRI | EET ADDRESS | | | ENUE | | E E | EET ADDRESS | | | |
| | -ST-ZIP | MIAM | FL 33147 | | DELETE | | Y-ST-ZIP | PD | Addition | |
| titu | | | | | ☐ DELETE | 3.1 TITL | | MARIA T. ROJAS | EPAGUIIOII | |
| NAM | | | | | | 3.2 NAN | | 1 | 1 | |
| | ET ADDRESS | | | | | | EET ADDRESS | Mrani, FL 33125 | Ì | |
| | -ST-ZIP | - | | | DELETE | 3.4. GIT 4.1 TITL | Y-ST-ZIP | SD Change | Addition | |
| TITL | | | | | ☐ precit | 4.7 HH. 4. 2 NAI | | WILLIAM RODRIGUEZ | <u></u> | |
| NAN | | | | | | | | 4220 SW 116 AV. | ļ | |
| | EET ADDRESS | | | | | | | Minni, FL. 33165 | 1 | |
| | '-ST-ZIP | | | | DELETE | | r-ST-ZIP | Change | Addition | |
| TITL | · | | | | C) becel | 5.1 TITL 6.2 MAN | | onunge | i i i i i i i i i i i i i i i i i i i | |
| NAM | | ļ | | | | 5.2 NAN | | | | |
| | EET ADDRESS | | | | | | FET ADDRESS | | | |
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| TITL | | | | | - been | 6.1 THL | | 1 Change | | |
| NAN | | | | | | 6.2 NAN | | | ļ | |
| | EET ADDRESS | | | | | | EET ADDRESS | | ļ | |
| CITY | -ST-ZIP | <u> </u> | | | Caradaan aad awalifu | | r-S1-ZIP | tod in Section 119 07/3Vi). Florida Statutes, I further certify that the | o information | |

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.

De Buins Health

1 /20/98

(305)5455924