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Feb 25, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000073104

1. Corporation Name
LOS AMIGOS AUTO SALES, INC.



Principal Place of Business

Mailing Address

1802 N. DIXIE HIGHWAY
LAKE WORTH FL 33460

1802 N. DIXIE HIGHWAY
LAKE WORTH FL 33460

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/22/1997

4. FEI Number

65-0776675

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☒

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1802 N. Dixie Highway
Suite, Apt. #, etc.

26 1802 N. Dixie Hwy
Suite, Apt. #, etc.

22

27

City & State

City & State

23 Lake Worth, FL

28 Lake Worth, FL

Zip

Country

Zip

Country

24 33460

25 USA

29 33460

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALVAREZ, RICARDO
1920 BARBADOS ROAD
LAKE CLARKE SHORES FL 33406

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 Lake Clarke Shores

84 City

West Palm Beach

FL

85 Zip Code

33406

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ricardo Alvarez

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/21/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME ALVAREZ, RICARDO
STREET ADDRESS 1920 BARBADOS ROAD
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406

1.1 TITLE ☐ Change ☐ Addition

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE ☐ DELETE

NAME VALDES, AMPARO
STREET ADDRESS 8001 W LAKE DRIVE
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406

2.1 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
43 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: *Ricardo Alvarez* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/99

Date

(561) 585-4655

Daytime Phone #

CR2E034 (11/98)