SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98; \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000074580 (6)

M & R AUTO SALES, INC.

Principal Place of Business

Mailing Address

FILED Jul 23 1998 8:00am Secretary of State



8710-12 EAST COLONIAL DR 8710-12 EAST COLONIAL DR ORLANDO FL 32817 ORLANDO FL 32817 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>08/22/1**9**97</u> 2. Principal Place of Business 2a. Malling Address Applied For 59-3463027 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intengible Yes Personal Property Tax due June 30. 24 29 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name - NEGRON, RENE 8710-12 EAST COLONIAL DR Street Address (P.O. Box Number is Not Acceptable) 82 : Orlando fl 32817 84 City Zip Code 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. 7-20-98 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. RINE Negrow / P DELETE
B 710-12 Cast Cobnial Dr. TITLE 1.1 TITLE Change Addition NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS Orlando, FL CITY-ST-ZIP 1.4 CITY-ST-ZIP 2.1 TITLE TITLE DELETE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS 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 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption steted 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 chapter, or on an attachment with an address.

7-20-98 (401) 207-6263