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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P97000074647 (3) DOCUMENT # 1. Corporation Name

AUTOCENTRAL USA, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					· · · · · · · · · · · · · · · · · · ·	
- 1		Mailing Address				
2215 NW 36TH STREET MIAMI FL 33142		2215 NW 36TH STREET MIAMI FL 33142				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 08/26/1997
2. Principal Pla	ice of Business	2a. Mailing Address				4, FEI Number Applied For
21		26				65-0777456 Not Applicable
Suite, Apt. #	, e 1c.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State		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 or has paid the current year Intangible
24	25]	29	30	,		Personal Property Tax due June 30. 🔀 Yes 🔲 No
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered Agent
	PUY, EVALDO F			"	Namo	·
	BRICKELL			82	Street	Address (P.O. Box Number is Not Acceptable)
	TE 805			83		
MIAI	MI FL 33131			63		
				84	City	85 Zip Code
				Ш		FL [®] ^{PP 0000}
11. Pursuant to office or ro	o the provisions of Sections 607.0503 glstered agent, or both, in the State n fami liar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida-Such change was dions of Section 607.0505. F	iles, the a authorize Iorida Sia	pove d by lutes	e-named the corp s.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE						e required when reinstating) DATE
12.	ilgnature, typed or printed name of registered agre OFFICERS AND		13.	а жде	in signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 10	ITLE		Change Addition
NAME	DUPUY, EVALDO F		1.2 N			SCOTT FITT
STREET ADDRESS	2215 NW 36TH STREET				ADDRESS	Scott, E. H.
CITY-ST-ZIP	MIAMI FL 33142			ITY - S		Jacksonville, Fl 22254
TITLE	D	DELETE	2.1 TI			Change Addition
NAME	GAMWELL, TIMOTHY B	-	2.2 N			
STREET ADDRESS	2215 NW 36TH STREET		i i		ADDRESS	
CITY-ST-ZIP	MIAMI FL 33142				ST - ZIP	
(TITLE	110111111111111111111111111111111111111	DELETE	3.1 TI		211	Change Addition
NAME			32 N	AME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP					ST - ZIP	
TEILE		DELETE	41 T			Change Addition
NAME			4.21	NAME		
STREET ADDRESS			43S	THEET	ADDRESS	
CITY-ST-ZIP				IIY-S		
TITLE		DELETE	511			Change Addition
NAME			5.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				ITY-S		
TITLE		DELETE	6.1 T			Change Addition
NAME			6.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				IIY-S		
14. Thereby ce	ertify that the information supplied w	th this filing does not qualify	for the ex	emp	tion state	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information

I nereoy ceruly that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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.

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