## 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 #	P97000079265
1 Corneration Name	1 01000010=00

AUTOMOTIVE GLOBAL NETWORKS, INC.



Principal Place of Business	Mailing Address		( (\$20) 60 to take (\$50 50) 60 to any 100 to 100 to 100 and 10
615 N BANNOCKBURN AVE	615 N BANNOCKBURN AVE		
TEMPLE TERRACE-FL 33617	TEMPLE TERRACE FL 33617		DO NOT WRITE IN THIS SPACE
US	US		3. Date Incorporated or Qualifed
			09/12/1997
2. Deinsingt Diese of Pusinger	2a. Mailing Address		4. FEI Number Applied For
2. Principal Place of Business		na Calac	59-3467565 Not Applicable
Suite, Apt. #, etc.	26 11109 US-(Y) 19 T	ON DONNE DI	\$8.75 Additional
<b>—</b>	27 527		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		<u></u> [ .	Trust Fund Contribution Added to Fees
Zip Country	Zip 22 ( 2	Country,	8. This corporation owes the current year Intangible
24 25	29 35647 30	o KillsburguyL	Personal Property Tax.  Yes No
9. Name and Address of Cur		J	10. Name and Address of New Registered Agent
		81 Name	
Soudijn, arthur		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
615 N BANNOCKBURN AVE		Jucer Addre	V. I.
TEMPLE TERRACE FL 33617		83	
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	2.	84 City	85 Zip Code
11. Pursuant to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the purpose of changing its registered.
office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obl	ate of Florida. Such change was autrigations of, Section 607.0505, Florida	nonzed by the corporation a Statutes.	in's board of directors. I hereby accept the appointment as registered:
SIGNATURE Signature, typed or printed name of registered	agent and title if applicable (NOTE: Re	egistered Agent signature required	d when reinstating) DATE
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	☐ DELETE	1.1 TITLE	Change Addition
NAME SOUDIJN, ARTHUR		1.2 NAME 1.7	104 Carrington Pank DR #527
STREET ADDRESS 615 N BANNOCKBURN AVE		1.3 STREET ADDRESS	5-000 (1 73/17
CITY-ST-ZIP TEMPLE TERRACE FL 3361		1.4 CITY-ST-ZIP	WY 171 33071
TITLE VSTD	☐ DELETE	2.1 TITLE	Change Addition
NAME WYATT, ROGER K JR		2.2 NAME	10101407
STREET ADDRESS 615 N BANNOCKBURN AVE		2.3 STREET ADDRESS	7104 Cerrington trach Dr #327
CITY-ST-ZIP TEMPLE TERRACE FL 3361		2.4 CITY-ST-ZIP	ampa, Fl. 33647  Change Addition  Change Addition
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4, 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
NAME .		6.2 NAME	
STREET ADDRESS	0	6.3 STREET ADDRESS	
l	/ 1	6 4 CITY-ST-ZIP	i

14. I hereby certify that the information supplied with his filing floes 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 attactionent with an address, with all other like empowered.

B13-975-9700