

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

FILED

Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000083304 (0)

1. Corporation Name

CARFIX, INC.

Principal Place of Business

1000 PONCE DE LEON BLVD.
SUITE 206
CORAL GABLES FL 33134

Mailing Address

1000 PONCE DE LEON BLVD.
SUITE 206
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/1997

4. FEI Number

65-0786631

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2000 SW 8th. street

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FLORIDA

Zip

24 33135

Country

25 DADE

2a. Mailing Address

26 1000 Ponce de Leon Blvd.

Suite, Apt. #, etc.

27 Suite 206

City & State

28 Coral Gables, Florida

Zip

29 33134

Country

30 Dade

9. Name and Address of Current Registered Agent

SANCHEZ, ERNESTO P.A.
814 PONCE DE LEON BLVD.
SUITE 505
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name JOSE SANZ
82 Street Address (P.O. Box Number is Not Acceptable)
199 Ocean Lane Dr., Aport. 1005
83
84 City KEY BISCAYNE FL 85 Zip Code 33149

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, 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

JOSE SANZ

(NOTE: Registered Agent signature required when reinstating)

DATE

January 5, 1998

12. OFFICERS AND DIRECTORS

TITLE D
NAME SANZ, JOSE
STREET ADDRESS 199 OCEAN LANE DRIVE, APT. 1005
CITY-ST-ZIP KEY BISCAYNE FL 33149

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 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.

SIGNATURE

January 5, 1998

CR2E034 (10/97)