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

Mailing Address 13930 NW 60TH AVE.

MIAMI LAKES FL 33014

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000088621

Principal Place of Business

13930 NW 60TH AVE. MIAMI LAKES FL 33014

KAR PROPERTY HOLDINGS, INC.

							DO NOT WRITE IN THIS SPACE					
							1 -	Incorporated or Qualife	d			
2. Principal Place of Business			2a. Mailing Address				1	4. FEI Number NOT APPLICABLE			Applied For Not Applicable	
Suite Act # etc			Suite, Apt. #, etc.								Additional	
Suite, Apt. #, etc.			27				5. Certi	5. Certificate of Status Desired Fee Required				
- City & State			City & State-					tiốn Campaign Financin	9		May Be	
23			28				Trust Fund Contribution Added to Fees					
Zip	Country		Zip Cou			y 8. This co		corporation owes the co			_	
24	25	29	30)			Pers	onal Property Tax.		☐ Yes	□No	
	9. Name and Address of Current	Regi	stered Agent				10. Nam	ne and Address of Nev	Registered A	Agent		
					81 Name					•		
DAVIDSON, MA RVIN			•			82 Street Address (P.O. Box Number is Not Acceptable)						
13930 NW 60TH AVE.			•			02 Street Address (F.O. DOX MUITIPOLIS NOT ACCEPTAGE)						
MIAMI LAKES FL 33014												
				8	4	City			FL	85 Zip	Code	
44	to the provisions of Sections 607.0502	~~~ ·	207 1509 Elocido Statuto-	the ob-		named co	moration sub-	mite this statement for th	e purpose of o	hanging it	s registered	
office or n agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	Flori	ida. Such change was auth	iorized b	ov tr	he corpora	ition's board o	f directors. I hereby acc	ept the appoin	tment as r	registered	
SIGNATURE	Signature, typed or printed name of registered agent i	and title	if applicable. (NOTE: Re	gistered Ac	gent s	signature requi	ired when reinstatin	ng)	DATE			
12. OFFICERS AND DI							ADDIT	TIONS/CHANGES TO C	FICERS AND	DIRECT	ORS IN 12	
TITLE	CDPS		☐ DELETE	1,1 TITLE	<u> </u>					Change	Addition	
NAME	LEVY, SID			1.2 NAMI	E		キ ソソ	SIDNEY	•	•		
STREET ADDRESS	13930 NW 60 AVE					ADDRESS -	• 5 ,	-1010-7				
	MIAMI LAKES FL 33014				1.4 CITY-ST-ZIP							
CITY-ST-ZIP TITLE	T		☐ DELETE	21 TITLE						Change	Addition	
	DIVIDSON, MARVIN P				2.2 NAME DA		1AV 1D 50	AVIDSON, MARVIN P		,_ ,	_	
NAME	13930 NW 60 AVE						2H 4 15	•				
STREET ADDRESS						ADDRESS .						
CITY-ST-ZIP	MIAMI LAKES FL 33014		DELETE	2. 4 CITY		-ZIP				Change	Addition	
TITLE			□ pere ie	3.1 TITLE							,	
NAME				3.2 NAM								
STREET ADDRESS				3.3 STRE	EETA	ADDRESS						
CITY-ST-ZIP				3.4. CITY		-ZIP				Channe	Addition	
TITLE			☐ DELETE	4.1 TITLE						Change	S C Audition	
NAME				4. 2 NAM	IE.							
STREET ADDRESS				4.3 STRE	EETA	ADDRESS						
CITY-ST-ZIP				4.4 CITY		ZIP					D 4 3 3 5 - 1	
TITLE			☐ DELETE	5.1 TITLE						Change	Addition	
NAME				5.2 NAM								
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP				5.4 CITY		ZIP						
TITLE			☐ DELETE	6.1 TITLE	Ε _					Change	e Addition	
NAME				6.2 NAM	E						. 1	
STREET ADDRESS			;	6.3 STRE	EETA	ADDRESS						
CITY-ST-ZIP				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:

FILED

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90080 002 ***150.00