

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

02111

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 21, 1999 8:00 am
Secretary of State

02-21-1999 90036 035 ***158.75

DOCUMENT # **P97000094481**

1. Corporation Name
GALAXY AUTO SALES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 3518 NW 36TH ST, MIAMI FL 33142, US

Mailing Address: 3518 NW 36TH ST, 2ND FL, MIAMI FL 33142, US

3. Date incorporated or Qualified: **11/04/1997**

2. Principal Place of Business (21) **3519 NW 36 St.** (22) Suite, Apt. #, etc.

2a. Mailing Address (26) **3519 NW 36 St.** (27) Suite, Apt. #, etc.

4. FEI Number: **65-0795570**

Applied For: Not Applicable

23. City & State: **MIAMI, FL**

28. City & State: **MIAMI, FL**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

24. Zip: **33142** (25) Country: **U.S.**

29. Zip: **33142** (30) Country: **U.S.**

6. Election Campaign Financing, Trust Fund Contribution: **-\$5.00 May Be Added to Fees**

9. Name and Address of Current Registered Agent: **VALDES, BASILIA L, 3519 NORTHWEST 36TH STREET, MIAMI FL 33142**

8. This corporation owes the current year Intangible Personal Property Tax: Yes No

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code: **FL**

10. Name and Address of New Registered Agent

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.

SIGNATURE: *Basilias L. Valdes* (NOTE: Registered Agent signature required when reinstating) DATE: **1/7/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALDES, BASILIA L	1.2 NAME	
STREET ADDRESS	3518 NW 36 ST 2ND FL	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33142	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARDIO IDANIA	2.2 NAME	CARDIO, IDANIA
STREET ADDRESS	190 W 39 PL	2.3 STREET ADDRESS	190 W 39 PL
CITY-ST-ZIP	HIALEAH, FL 33012	2.4 CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Basilias L. Valdes* (SIGNED) DATE: **1/7/99** DAYTIME PHONE #: **636-0746**

CR2E034 (1/1/98)