

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1998		y of State ORPORATIONS		
DOCU 1. Corporatio	MENT # P97000	096530 (5)			
EURO IN	NTERNATIONAL AUTO, INC	1		. (231/2011 (10 (0))) (00°)) 00/) 20/) 20/) 20/)	HI n ifina b hari b ha r bhili ar h a r h
D to to the					
Principal Place of Business Mailing Address		*			
		701 S.W. 2ND AVE. Miami Fl 33130			
				DO NOT WRITE IN TO	HIS SPACE
ļ				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		11/10/1997 4. FEI Number	Applied For
21		26		65-079540	
Suite, Apt. #, etc,		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25		30	This corporation owes or has paid the Personal Property Tax due June 30.	Current year Intangible
	9. Name and Address of Curren			10. Name and Address of New Register	
PETERSON, MARIA			81 Name		
701 S.W. 2ND AVE.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33130					
			83		
			84 City		85 Zip Code
11. Pursuan	t to the provisions of sections 607 050	2 and 607 1508 Florida Statutes	the above-named corpo		
office or	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was au ations of section 607,0505. Flor	thorized by the corporate	ration submits this statement for the purpose of on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	am rammar with, and accept the cong	anons on section our soco, Flor	iod oldiolos.		
<u></u>	Signature, typed or printed name of registered age		E: Registered Agent signature requ		
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
NAME	RUIZ MARCELO	L DELETE	1.2 NAME		Change Addition
STREET ADDRESS	701 S.W. 2ND AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33130		1.4 CITY-ST-ZIP		
TITLE	DV	DELETE	2.1 TITLE		Change Addition
NAME	RODRIGUEZ, FERNANDO		2.2 NAME		-
STREET ADDRESS	701 S.W. 2ND AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33130	<u> </u>	2.4 CITY-ST-ZIP		
TITLE	PET É RSON, MARIA	☐ DELETE	3.5 TITLE		Change Addition
NAME STREET ADDRESS	701 S.W. 2ND AVE.		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33130		3.4 CITY-ST-ZIP		•
TITLE		DELETE	4.1 TITLE	_	Change Addition
NAME			4.2 NAME	·	<u> </u>
STREET ADDRESS	-		4.3 STREET ADDRESS		•
CITY-ST-ZIP			4.4 CiTY-ST-ZIP		
TITLE		L] DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		OLLL 1.	6.2 NAME		the straings the reaction
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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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP