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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000098919

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

LUXURY	CARS OF PALM BEACH, IN	C.									
Principal Place	of Business	Mailing Address				I ARABAMI AND I	ATÂN TARIN RANN ARNIN ARNIN BE	/// 	AIND INIDI I	1010 HER 1001	
2275 PALM BEA	VD SUI	TE 4	-		• •						
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3340						DO NOT WRITE IN THIS SPACE					
						ate incorporate 1/20/1997	d or Qualifed				
2. Principal Place of Business 2a. Mailing Address						El Number			App	lied For	
21	26				6	5-0791477			Not	Applicable	
	, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired			\$8.75 Additional		
22	27				5. 0	5. Certificate of Status Desired					
City & State	ate City & State				6. E	6. Election Campaign Financing \$5.00 May Be					
23	28				.т	Trust Fund Contribution Added to Fees					
Zip	Country 25	Zip 30	У		8. This corporation owes the current year Intangible Personal Property Tax.						
9. Name and Address of Current Registered Agent							ess of New Regi	stered Ager	nt		
				1 Name			-				
CERESA, DERIS J 7004 GALLEON COVE CIRCLE PALM BEACH GARDENS FL 33418					et Address (P.O. Box Number is Not Acceptable) 275 PALM BEACH LAKES BLVD 4						
					U EST	Paum B		FL 85	133	401	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, he above named corporation submits this statement for the purpose of changing its registered soffice 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	Signature, typed or printed name of registered agent a	Agent signature required when reinstating) Agent signature required when reinstating)									
12. OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	PST	☐ DELETE	1.1 TITLE		*			K (Change	Addition	
NAME	CERESA, DERIS					- 70	AKH LAKES	BIVD	Sugar	u	
STREET ADDRESS 7004 GALLEON COVE CIR			1.3 STRE	ET ADDRESS	2275		HCH DENCO				
CITY-ST-ZIP PALM BCH GARDENS FL 33418			1.4 CITY-	ST-ZIP	WEST	Paun	BEACH.		3349		
TITLE	☐ DELETE			2.1 TITLE					Change	Addition	
NAME			2.2 NAME				• •				
STREET ADDRESS	ESS			2.3 STREET ADDRESS							
CITY-ST-ZIP				2. 4 CITY-ST-ZIP							
TITLE	DELETE-			3.1 TITLE					Change -	Addition	
NAME		:	3.2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS							į	
CITY-ST-ZIP				3.4, CITY-ST-ZIP							
TITLE DELETE			4.1 TITLE						Change	Addition	
NAME		!	4. 2 NAM	E							
STREET ADDRESS			4.3 STRE	ET ADDRESS						1	

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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

SIGNATURE: Perisi

☐ Addition

☐ Addition

☐ Change

Change