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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P970
1. Corporation Name
FINE LINE COLLISION, CORP. P97000099795 (1)

FILED Feb 27 1998 8:00am Secretary of State



Principal Place of Business		Mailing Addres	is			I lakithat sid latit antit antit antit antit antit intit sette intit sade entit ditt (dat		
2014 WEST 73RD STREET		2014 WEST 73	2014 WEST 73RD STREET					
HIALEAH FL 33016		HIALEAH FL 3	HIALEAH FL 33016			DO NOT HIDITE IN THIS SPACE		
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 11/21/1997		
2. Principal Pi	ace of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For	
21		26	26			165-07465.52	Not Applicable	
Suite, Apt. (, etc.	Suite, Apl.	Suite, Apt. #, etc.				5 Additional	
22		27	27			Fee	Required :	
City & State		City & State	City & State				00 May Be	
23		28					led to Fees	
Zip	Country	Z (p)	-	Country		8. This corporation owes or has paid the current yea Personal Property Tax due June 30.	r Intangible	
24	25	29	[30]	30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
Name and Address of Current Registered Agent CABRERA, SERGIO					Name	10. Halle and Addiess of Now (103)steleo Agent		
			<u> </u>					
	14 WEST 73RD STREET		82 Stre		Street Ad	ddress (P.O. Box Number is Not Acceptable)		
n/	LEAH FL 33018		-					
				83				
				84	City	FL 85 3	Zip Code	
44 Burguest t	o the provisions of Sections 6/17	01.02 and 607 1508. Fin	rida Statutos, the	above	a-named c		no its registered	
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 I lorida. 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, typod or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.		AND DIRECTORS	13		-	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12	
TITLE			TITLE		☐ Char	nge 🔲 Addition		
NAME	E CABRERA, SERGIO		1.2 N					
STREET ADDRESS	REET ADDRESS 2188 WEST 60TH ST		1.3 S		ADDRESS		li	
CITY-ST-ZIP	HIALEAH FL 33016			1.4 CITY-ST-ZIP			i	
TITLE	☐ DÉLETÉ		DELETE 21	21 TITLE		☐ Char	nge 🛄 Addition !	
RAME			22 N					
STREET ADDRESS	TREET ADDRESS		238		ADDRESS		ŀ	
CITY - ST - ZIP				CITY-S	ST-ZIP			
TITLE		Ц	· · · · · · · · · · · · · · · · · ·	TITLE]	Char	nge 🔲 Addition	
NAME			•	NAME			ţ	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-	ST-ZIP	☐ Char	nge Addition	
TITLE		Ц		TITLE		Li Criar	ine Throuting	
NAME				NAME	400000		i	
STREET ADDRESS					ADDRESS		1	
CITY-ST-ZIP				CITY-S TITLE	ST-ZIP	Char	nge Addition	
TITLE		لــا		NAME		L Chair		
NAME					ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP TITLE		П		CITY - S TITLE	or-ZIP	☐ Chai	nge Addition	
NAME				NAME				
			i i		ADDRESS		1	
STREET ADDRESS				CITY-5				
CITY-ST-ZIP			5.4	DIE 1 - 5	51-71L			

14. Thereby 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 informatic 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: