FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90300 030 ***150.00

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000016150

1. Corpora ion Name

INTERNATIONAL AUTO TECH, INC.

Principal Place of Business Mailing Address						11001100111		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2601 S. STATE ROAD 7 2601 S. STATE ROAD 7										
HOLLYWOOD FL 33023			HOLLYWOOD FL 33023	HOLLTWOOD PL 33023			DO NOT WRITE IN THIS SPACE			
						3. Date Ir corpora 02/19/1998				
2. Principal Place of Business			2a. Mailing Address			4. FEI Number		Ap	p ied For	
21			26		65-0813/60		No	t Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired		•	\$8.75 Additional		
22			27			3. Oct. III of the state Desired			Fee Required	
City & S ate			City & State		6. Electio 1 Campaign Financing \$5.00 May Be		•			
23			28			Trust Fund Co	ntribution	Added to	o Fees	
Zip	Count	ry	Zip	Cour	itry		on owes the current year		[9Ko	
24	25		29	30		Personal Prop			[]NO	
	9. Name and Add	ess of Curren	t Registered Agent	-	81 Name	10. Name and Ad	Idress of New Register	e a Agent		
AME	RILAWYER				14ame	<u> </u>				
343 ALMERIA AVENUE					82 Street Add	lress (P.O. Box Numbe	er is Not Acceptable)			
	AL GABLES FL 331	34		-	83					
		•			55					
				ľ	84 City			85 Zip C	Code	
SIGNATURE	ed or printer	ne c. ್ವಾಸ್ಕಾರ್ಣed ager		: Registereu /	Ayenit sığnature requi		HANGES TO OFFICERS		DE Q IN 12	
12.	DPT	JEFICERS AN	DELETE	13.		ADDITIONS/CF	ANGES TO OFFICERS	Change	Addition	
TITLE			1.2 NA							
NAME	GOOD O OTATE DE	14D 7			REET ADDRESS					
STREET ADDRE 3S	HOLLYWOOD FL				Y-ST-ZIP					
TITLE	DVS	30020	DELETE	2.1 TIT				Change	Addition	
NAME	KWON, YOUNG D			2.2 NA	ľ			<u> </u>	_	
STREET ADDRESS	AAAA A ATATE DE				REET ADDRESS					
	HOLLYWOOD FL				TY-ST-ZIP					
CITY-ST-ZIP TITLE	HOLLINGODIL	70020	☐ DELETE	3 1 TIT			****	☐ Change	Addition	
NAME				3 2 NA	ME					
STREET ADORE 3S				3.3 STF	REET ADDRESS					
CITY-ST-ZIP				3.4. CIT	ry-ST-ZIP					
TITLE			☐ DELETE	4.1 TITI	LE			Change	Addition	
NAME				4 2 NA	ME					
STREET ADDRESS				4.3 STF	REET ADDRESS					
CITY-ST-ZIP				4.4 CIT	Y-ST-ZIP					
TITLE			☐ DELETE	5.1 TIT	LE			☐ Change	☐ Addition	
NAME				52 NA	ME					
STREET ADDRE IS				5.3 STI	REET ADDRESS					
CITY-ST-ZIP					Y-ST-ZIP					
TITLE			☐ DELETE	6.1 TIT				Change	Addition	
NAME				62 NA						
STREET ADDRESS	I			63 ST	REET ADDRESS					

14. I hereb / 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 or derived on 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 open an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FFICER OR DIRECTOR

754 986 5452