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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90124 037 ***150.00

DOCUMENT # P98000018553

1. Corporation Name

HIGH TECH CAR ACCESORIES, INC.

|--|

Principal Place of Business	Mailing Address	///.2 = ACT		& AUE					i ide	
4165 EAST 8 AVE 4163 EAST 8 AVE 4165 EAST 8 AVE HIALEAH FL 33013					DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualifed	IE IN IMIS	SPACE	<u>:</u>		
					02/26/1998					
Principal Place of Business 2a. Mailing Address					4. FEI Number 65-08157.35			Applied For		
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					65-0810125		Not Applicable \$8.75 Additional			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27.					5. Certificate of Status Desired		Fee Required			
City & State	City & State				6. Election Campaign Financing		\$5	.00 N	May Be	
23	28				Trust Fund Contribution		Ad	ded to	Fees	
Zip Cou	Coun	try		8. This corporation owes the current year Intangible						
24 25	29	30			Personal Property Tax.		☐ Yes	<u>. </u>	□No	
9. Name and Ad	Idress of Current Registered Agent				10. Name and Address of New F	Registered	\gent			
CONTALET BIAND		*	B1	Name						
GONZALEZ, JUAN D 4485 EAST 8 AVE 4163			82	Street Addres	ible)					
HIALEAH FL 33013		1	33	_						
		1	B4	City	•		85	Zip Co	ode	
	Sections 607.0502 and 607.1508, Florida 5							ag ito r	- agistored	
SIGNATURE Signature, typed or printed	accept the obligations of, Section 607.0509	(NOTE: Registered A		_		DATE	, 		P IN 12	
12.	OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN			Addition	
TITLE D	☐ DELE						☐ Cha	arige	L. Addition	
NAME GONZALEZ, JUA	NU SACTEAUE	1.2 NAM					•			
	E 4163 EAST 8 AVE	1.3 STR	EET.	ADDRESS						
CITY-ST-ZIP HIALEAH FL 330		1.4 CIT)		-ZIP					□ Addition	
TITLE D	⊠ DELE:						Chi	ange	☐ Addition	
NAME ARTILES, JESUS	TOP/FIE	2.2 NAM	Æ						4	
STREET ADDRESS 4163 EAST 8 AV		2.3 STR	EET.	ADDRESS						
CITY-ST-ZIP HIALEAH FL 330)13	2. 4 CIT		r-ZIP					- A - 1-1141	
TITLE PARTY	6002ALEA DELE	TE 3.1 TITL		~- -			Cha	inge .	Addition	
NAME CLA THIG3 E.	AST GTH AVE	3.2 NAM								
STREET ADDRESS WIALEA	9H-FLA-33013) W. GOWZARE	3.3 STR		ADDRESS						
CITY-ST-ZIP	\	3.4. CIT		r-ZIP	 		∏ Cha		[] Addition	
TUAR) M, GOWZARE	TE, 4.1 TITL						ขเกิ ผ		
NAME		4. 2 NA	•	{						
STREET ADDRESS		4.3 STR	EET.	ADDRESS						
CITY-ST-ZIP		4.4 CITY		-ZIP		_			/- /	
TITLE	DELETE 5.1 T				•		Ch:	ange	☐ Addition	
NAME		5.2 NAM								
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP		5.4 CITY		- ZIP		_				
TITLE	□ DELE						☐ Ch	ange	Addition	
NAME		6.2 NAM							,	
STREET ADDRESS		6.3 STR	EET	ADDRESS						
		■ a a arm		710						

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.

SIGNATURE:

01-06-99