

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

FILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90118 026 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000020135

1. Corporation Name

ALL AUTOSA ADI BDI TRAFFIC SCHOOL INC.

Principal Place of Business

Mailing Address

2157 WEST FLAGLER
MIAMI FL 33135

2157 WEST FLAGLER
MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/03/1998

4. FEI Number

65-0863517

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

No

9. Name and Address of Current Registered Agent

MESA, ARDO
2157 WEST FLAGLER
MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name JULIO R. GONZALEZ SR

82 Street Address (P.O. Box Number is Not Acceptable)
2157 WEST FLAGLER ST

83 MIAMI FL

84 City FL 85 Zip Code 33135

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 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

Julio R. Gonzalez Sr. Director

03-30-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input checked="" type="checkbox"/> DELETE
NAME	MESA, ARDO	
STREET ADDRESS	2157 WEST FLAGLER	
CITY-ST-ZIP	MIAMI FL 33135	

TITLE	VTD	<input checked="" type="checkbox"/> DELETE
NAME	MESA, CAMELIA	
STREET ADDRESS	2157 WEST FLAGLER	
CITY-ST-ZIP	MIAMI FL 33135	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	P/D JULIO R. GONZALEZ, JR.
3.3 STREET ADDRESS	3470 N.W. 5th ST.
3.4 CITY-ST-ZIP	MIAMI, FL 33125

4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	V/D JULIO R. GONZALEZ SR.
4.3 STREET ADDRESS	3470 N.W. 5th ST.
4.4 CITY-ST-ZIP	MIAMI, FL 33125

5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	T/S ADA R. GONZALEZ.
5.3 STREET ADDRESS	3470 N.W. 5th ST.
5.4 CITY-ST-ZIP	MIAMI, FL 33125

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

Julio R. Gonzalez Sr. Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/29/99 305 226-0909

Date

Daytime Phone #

CR2E034 (11/98)