

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  
Apr 16, 1999 8:00 am  
Secretary of State

04-16-1999 90078 031 \*\*\*150.00

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1. Corporation Name

EZ MOTORS SALVAGE & REPO IMPORT/EXPORT, INC.

Principal Place of Business

Mailing Address

1525 West 35 Place  
Hialeah, FL 33012

1525 West 35 Place  
Hialeah, FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/24/98

2. Principal Place of Business

2a. Mailing Address

21 7696 W. 30 LANE

26 7696 W. 30 LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0821329

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

City & State

City & State

23 HIALEAH GARDENS, FL

28 HIALEAH GARDENS, FL

Zip

Country

Zip

Country

24 33018

25 USA

29 33018

30 USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Elexander Zamora  
1525 West 35 Place  
Hialeah, FL 33012

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7696 W. 30 LANE

83

84 City

HIALEAH GARDENS FL

85 Zip Code

33018

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PST ELEXANDER ZAMORA ☐ DELETE  
NAME  
STREET ADDRESS 1525 West 35 Place  
CITY-ST-ZIP Hialeah, FL 33012

1.1 TITLE PST ELEXANDER ZAMORA ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 7696 W. 30 LANE  
1.4 CITY-ST-ZIP HIALEAH GARDENS, FL 33018

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elexander Zamora

Date

Daytime Phone #

CR2E034 (11/98)