

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 29, 1999 8:00 am
Secretary of State

03-29-1999 90041 033 ***150.00

DOCUMENT # P98000044844

1. Corporation Name

STEVEN KESSLER MOTOR CARS S.F., INC.



Principal Place of Business

11900 BISCAYNE BLVD., STE. 809
C/O LEE MILICH, P.A.
NORTH MIAMI FL 33181

Mailing Address

11900 BISCAYNE BLVD., STE. 809
C/O LEE MILICH, P.A.
NORTH MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1998

4. FEI Number

65-087177

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

2. Principal Place of Business

2a. Mailing Address

21 1301 EAST COUNTRY CLUB DR
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 Ft. Lauderdale Fla.
City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 Broward

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILICH, LEE

11900 BISCAYNE BLVD., STE. 809
NORTH MIAMI FL 33181

1301 EAST COUNTRY CLUB DR
Ft. Lauderdale Fla 33304

81 Name

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

83 100 West Cypress Creek Road

84 Suite 935, Trade Centre South

Ft. Lauderdale, FL 33309

FL

85 Zip Code

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 D ☐ DELETE
NAME KESSLER, STEVEN
STREET ADDRESS 19601 EAST COUNTRY CLUB DR.
CITY-ST-ZIP AVENTURA FL 33180

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME FELDSTEIN, CLIFFORD
STREET ADDRESS 30 WEST 63RD STREET, #12L
CITY-ST-ZIP NEW YORK NY 10023

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

TITLE ☐ DELETE
NAME Alice Kessler
STREET ADDRESS 19601 Aventura Blvd
CITY-ST-ZIP Miami - Treasurer & Sec

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

I 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 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 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)