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Apr 20, 1999 8:00 am Secretary of State

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## **PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Kathedne Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000061946

PERFORMANCE AND ACCESSORY WAREHOUSE INC

<u> </u>					
Principal Place of Business	Malling Address		1		
18746 S.W. 107 AVE. MIAMI FL 33157	18746 S.W. 107 AVE. MIAMI FL 33157	وجاء ومورة الإ	DO NOT-WRITE IN T	HIS SPACE	
	24.		Date incorporated or Qualifed     07/13/1998		
L Principal Place of Business	2a. Malling Address		4. FEI Number 65-0854550	Applied F	
·	26		63-003 7350	Not Appli	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition Fee Required	ายไ
City & State	City & State		6. Election Campaign Financing	\$5.00_May.B	
3	28		Trust Fund Contribution	Added to Fees	<u>.                                    </u>
Zip Country	Zip	Country 38	This corporation owes the current year     Personal Property Tax.	r Intangible □Yes ŪNo	
· · · · · · · · · · · · · · · · · · ·	Current Registered Agent	1001	10. Name and Address of New Register	red Agent	
		81 Name	,		
CHEN, JEFFREY		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
18746 S.W. 107 AVE. MIAMI FL 33157		63			
MACHITE GOISE		53			
		84 City		85 Zip Code	
SIGNATURE	·		rporation submits this statement for the purpost tion's board of directors. I hereby accept the ap		4
SIGNATURE Signature, typed or printed name of regal	stered agant and side if applicable. (NOTE ERS AND DIRECTORS	: Registered Agent signature requi		AND DIRECTORS IN	
SIGNATURE Signature, typed or printed nume of regis  12. OFFICE  THE PRESCONT	ERS AND DIRECTORS	13.	ired when reinstating} DATE	AND DIRECTORS IN	12
SIGNATURE Signature, typed or printed nume of regis  12. OFFICE  THE PRESCOLT	ERS AND DIRECTORS	: Registered Agent signature requi 13. 1.1 TTLE 12 NAME	ired when reinstating} DATE	AND DIRECTORS IN	12
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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 cath; 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.

CTTY-ST-ZP