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

DOCUMENT # **P98000063490**1. Corporation Name

AUTOMOTIVE INDUSTRIES, INC.

Mailing Address

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90179 017 ***150.00



13520 SW 96TH STREET MIAMI FL 33186		13520 SW 96TH STREET MIAMI FL 33186			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 07/16/1998	
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number Applied F Not Appl	licable
Suite, Apt. i	¥, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired • \$8.75 Addition Fee Required	
City & State	, -	City & State		•	6. Election Campaign Financing. S5.00 May E Added to Fee	
Zip 24	Country 25	Zip 29 3	Country	'	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes 🕱 No	,
	Name and Address of Current	t Registered Agent			10. Name and Address of New Registered Agent	\longrightarrow
			81	Nam	ne .	
1352	FILLO, JORGE M D SW 96TH STREET		82	Stree	eet Address (P.O. Box Number is Not Acceptable)	
MIAM	II FL 33186		83			1
			84		₽ ■ 1 j	
	to the provisions of Sections 607.050 egistered agent, or both in the State on familiar with, and accept the obligation	2 and 607.1508, Florida Statutes of Florida. Such change was autitions of, Section 607.0505, Florida	the above horized by la Statutes		ped corporation submits this statement for the purpose of changing its regist or poration's board of directors. I hereby accept the appointment as registered as the composition of the	ered ed
SIGNATURE	Signature typed or printed name of registered age	and title if applicable. (NOTE: R	Registered Ager	nt signatur	ure required where reinstating) DATE DATE	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	P D	☐ DELETE	1.1 TITLE		☐ Change ☐	Addition
NAME	CASTILLO, JORGE M		1.2 NAME		·	
STREET ADDRESS	13520 SW 96TH STREET		1.3 STREE	TADDRES	ESS	}
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-S	T-ZIP		
TITLE	· ···	☐ DELETE	2.1 TITLE		Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	TADDRES	ess	ŀ
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP		A delision
TITLE	-	☐ DELETE	3.1·TITLE		Change □	Addition
NAME			3.2 NAME			ļ
STREET ADDRESS			3.3 STREE	TADDRES	ESS	,
CITY-ST-ZIP			3.4, CITY-S	ST-ZJP		Addition
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	TADDRES	ESS	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4.4 CITY-S	T-ZIP		Addition
TITLE		☐ DELETÉ	5.1 TITLE		☐ Change ☐	Addition
NAME			5.2 NAME			ſ
STREET ADDRESS			5.3 STREE		ESS	,
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		l Aululitia -
TITLE		☐ DELETÉ	6.1 TITLE		☐ Change ☐	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	TADDRES	ESS	I
OFFICE TIP			6.4 CITY-S	T-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: