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85 Zip Code

FILE NOW:	<b>FILING FEE</b>	<b>AFTER MAY</b>	1ST IS	\$550.00
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PROFIT				
CORPORATION				
<b>ANNUAL REPORT</b>				
4000				



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT 1. Corporation Name	#	S01	678
1. Corporation Name		<b>U</b> U 1	0.0

ECONOMY CARS, INC.

3260 N.W. 45TH ST. MIAMI FL 33142

46	rincipal Place of Business 346 NW 17TH AVE IAMI FL 33142 S	Mailing Address 3260 N.W. 45TH ST. MIAMI FL 33142				
2.	Principal Place of Business	2a. Mailing Address				
21		26				
	Suite, Apt. #, etc.	Suite, Apt #, etc.				
22		27				
	City & State	City & State				
23		28				
	Zip Country	Zip	Country			
24	25	29	30			
	9. Name and Address of C	urrent Registered Agent				
	JOHNSON, ERNEST E.		81 Name			

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



	DO NOT WRITE	DO NOT WRITE IN THIS SPACE				
	3. Date Incorporated or Qualified 09/24/1990 4. FEI Number 65-0252181	Applied For Not Applicable				
	5. Certificate of Status Desired	[]	\$8.75 Add-tional Fee Required			
	Election Campaign Financing     Trust Fund Contribution	E'1	\$5.00 May Be Added to Fecs			
ntry	8. This corporation owes the currer Personal Property Tax	it <b>y</b> ear l	Intangible [TYes [T]No			
81 Name	10. Name and Address of New Re Address (P.O. Box Number is Not Acceptab	_	d Agent			
300007	Address (F.O. Box Number is Not Acceptab	ie,				

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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. Thereby accept the appointment as registered agent. I am agrilia with, and accept the obligations of Section 607.0505, Florida Statules.

83 84 City

12.	OFFICERS AND DIRECTO	ORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITUE	Р	DE DELETE	1 1 TULF	P	( <del>₽) C</del> riange	[   Add ton
NAME	JOHNSON, ERNEST E.		1.2 NAME	PAMEIA A. WILLIAMS		
STREET ADDRESS	3260 N.W. 45TH ST.		1.3 STREET ADDRESS	10 N.W. GOT STREE	+	
CITY-ST-ZIP	MIAMI FL		14 CITY-S1-ZF	MIAMI, FIA 33127		
TITLE	CD	DELETE	2 1 TITLE	1 5 '	[] Change	[ ] Addition
NAME	JOHNSON, ELDRICK		2.2 NAME	CYNTHIA LOUISSIEZE		
STREET ADDRESS	3260 NW 45TH ST.		2.3 STREET ADDRESS	5395 N.W. 13AVE.		
CITY-ST-ZIP	MIAM) FL		2 4 CITY - \$1 - 7H	MIAMI Fla 33142		
TITLE		( ) DELETE	3 1 TITLE		[_] Change	["] Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS	i <b> </b>		
CITY-ST-ZIP			34 CITY-ST-ZIP			
TITLE		[] DELETE	41 TrīLE	800002799 -03/09/990	["] Change	Addition
NAME			4. 2 NAME	33 	11069NI	17
STREET ADDRESS			4.3 STREET ADDRESS	****150.00	****150	ລົດຕ
CITY-ST-ZIP			44 CH Y-ST-ZIP	**************************************		
TITLE		[] DELETE	5 1 TITLE		[ ] Change	[ ] Addition
NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS	1		
CITY-ST-ZIP			54 CITY-ST-ZIP			
TITLE		[7] DELETE	61TITLE	\vartheta\range \range \lambda \range	[ ] Change	[ ] Addition
NAME			6 2 NAME		a MU	
STREET ADDRESS			63 STREET ADDRESS	<b>Y</b>	ルイグしょ	

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 chapter of the corporation or an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

Hamila H. WUF lands NONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daylor e Phone #