FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S08210

(4)

Mailing Address

T.I. AUTO SALES, INC.

Principal Place of Business

FILED
Apr 15 1997 8:00am
Secretary of State

2240 NW 26TH AVE. MIAMI FL 33135		2240 NW 26TH AVE. MIAMI FL 33142-7100					
					3. Date Incorporated or Qualified 10/24/1990	3a. Date of Last 04/24/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	├ ── -	Applied for	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0224328	65-0224328 Not Applie S8.75 Addition		
22		27		5. Certificate of Status Desired	Fee Required		
City & Stat	е	City & State			6. Election Campaign Financing	/ \$5.00	May Be
23		28			Trust Fund Contribution		d to Fees
Zip 24	Country 25	29 Zip	30 Cour	ntry	8. This corporation has hability for i	ntangible tax under. Yes No	s 199 032,
	9. Name and Address of Curre		1301		10. Name and Address of New Re		
IZQI	UIERDO, ANTONIO			81 Name			
2432 SW 113TH PLACE			82 Street Addre		Address (P.O. Box Number is Not Acceptab	le)	
MIAMI FL 33135				83		- 	
				03			
				84 City		FI 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Stat	tutes, the ab	L ove-named	corporation submits this statement for the p	urpose of changing	its registered
office or r agent. La	registered agent, or both, in the State om familiar with, and accept the obliq	e of Florida. Such change wa jations of, Section 607.0505,	s authorized Florida State	by the cor ites.	poration's board of directors, I heroby accep	I the appointment a	is registered
SIGNATURE					<u> </u>		
40	Signature, typed or printed name of registered at	jent and little if applicable (N VD DIRECTORS		Agent signature	required when reinstating)	DATE	7DC IN 142
12.	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	··
NAME	IZQUIERDO, ANTONIO	_	1,2 NA1		Elizabeth Izguierdo		
STREET ADDRESS	2432 SW 113TH PLACE		1.3 STF	REEL ADORESS	2437 60 118 86	•	
CITY-ST-ZIP	MIAMI FL		1,4 C()	Y - \$1 - 2(P	2437 GD 118 PL 12169		
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NAME			2 ? NA!				
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TITLE		☐ DELETE.	6 1 TITE	F		Change	Addition
NAME			6.2 NAI	AC.			
STREET ADDRESS			6.3 STR	EFT ADDRESS			
CITY-ST-ZIP	a postfuthat the inferrouture of malle	d with this time does not an	6 4 CIT	Y-SI-ZIP	dylad in Coation 110 07/2/// Florida Statistics	I further portify the	ul the

19. I do nereby 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 supportional report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 manged of the an address.

CIGNATURE:

Pertuin Hornigen will all address

1/1/97

(205) (3301)