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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S08210

(4)

T.I. AUTO SALES, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



2240 NW 26T MIAMI FL 331		2240 NW 26TH AVE. MIAMI FL 33135			DO NOT WRITE IN THIS S	PACE	
					3. Date Incorporated or Qualified 10/24/1990	ACE	
2. Principal P	lace of Business	2a. Mailing Address			4. FFI Number	Ar	oplied For
2739	4 NW) 21 Tex(QCe	26 2294 NW 2	21 Te	reac	Le 65-0224328	·	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	2_1	/.\			Additional
22		27			5. Certificate of Status Desired	•	equired
City & State		City & State 28 Miomi FL		Election Campaign Financing Trust Fund Contribution			
Zip 24 33	147 25 USA	7(p) Country 29 33142 30 USA			8. This corporation owes or has paid the cyrrent year Intangible Personal Properly Tax due June 30. 1 Yes No		
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
IZQUIERDO, ANTONIO 81 N							
243	32 S W 113TH PLACE AMI FL 33135		82	82 Street Address (P.O. Box Number is Not Acceptable)			
""	111 1 L 00 100		83				
			-	0		Ta-1 -	
ľ			84	City	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 i			ent signature	required when reinstating) DATE	DIDECTOR	
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFICERS AND		Addition
TITLE	PO ANTONIO	DELETE	1.1 TITLE			Change	LI AGGILION
NAME	Assa City section in the		1.2 NAME				l:
STREET ADDRESS	MIAMI FL			ADDRESS			
CITY-ST-ZIP TITLE			1.4 CITY - 5 2.1 TITLE			Change	Addition
1					+ mileido. Flizabeth	Man Change	Addition
NAME OTOGET ADDRESS	2483 SW 112 PL		2.2 NAME		129012100) L12 Pl		į.
STREET ADDRESS	SS 2483 SW 112 PL MIAMI FL		2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		I 29vierdo, Elizabeth 2432 SW 113 Pl Miami, Pl 33165		İ
CITY-ST-2IP TITLE	The state of the s		2. 4 CHY - 3.1 TITLE	SI-ZIP	MIUMITE 23163	Change	Addition
NAME			3.2 NAME			onango	
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CITY-ST-ZIP			3.4. CITY-				1
TITLE			4.1 TITLE	J1-£11		Change	Addition
NAME		•	4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS	<i>i.</i>		ŀ
CITY-ST-ZIP			4.4 CITY - S		•		
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME		-	5 2 NAME	}			
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			54 CITY-S				
TITLE			61 THILE			Change	Addition
NAME		☐ DELETE	62 NAME				_
STREET ADDRESS			63 STREET	ADDRESS			
CITY+ST-ZIP	certify that the information supplied with	the filing does not qualify for	64 City-S		d in Section 119 07(3)(i) Florida Statutes I further cer	tily that the	information

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1.19.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or suppliering tall 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 of the acceiver 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 open attachment an address.

OLONIATURE.

President

4/15/00 (200)(-22-017