

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL -3 AM 8:34

DOCUMENT # S19241 (6)

1. Corporation Name

CHEAPO AUTO GLASS NO. 2, INC.

Principal Place of Business

Mailing Address

**720 NE 4TH PLACE 7340 SW 8 ST
HALEAH FL 33010 MIAMI, FL 33144**

**720 NE 4TH PLACE 7340 SW 8 ST
HALEAH FL 33010 MIAMI, FL 33144**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/13/1990	3a. Date of Last Report 07/15/1994
4. FEI Number 65-0233736	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. ☐	\$5.00 May Be Added to Fees
7. This corporation has liability for delinquent tax under s. 190.017 Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. # etc

26
Suite, Apt. # etc

22
City & State

27
City & State

23
Zip

28
Zip

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HERNANDEZ, RUBEN
720 NE 4TH PLACE 7340 SW 8 ST
HALEAH FL 33010 MIAMI, FL 33144**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 turnkey with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person (or persons) named as registered agent in this report

(NOTE: Registered Agent signature required when replacing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS AND DIRECTORS

TITLE	DP
NAME	HERNANDEZ, RUBEN
STREET ADDRESS	720 NE 4TH PLACE
CITY, ST, ZIP	HALEAH FL
TITLE	DV
NAME	HERNANDEZ, BENITO
STREET ADDRESS	720 NE 4TH PLACE
CITY, ST, ZIP	HALEAH FL
TITLE	DST
NAME	JORGE, GENERAO D.
STREET ADDRESS	1422 W. 40TH ST.
CITY, ST, ZIP	HALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information furnished with this report is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this 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, and that 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, or in the attachment with an address.

SIGNATURE:

[Handwritten Signature]

RUBEN HERNANDEZ

06/12/95 305-761-1040

(Signature and name of officer or director)

CR2E034 (3/95)