## 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 # SA3737

(3)

## **FILED** Feb 18 1997 8:00am Secretary of State

1. Corporation Name A. N. M. VALUE AUTO SALES, INC.  Principal Place of Business 780 N.W. 27TH AVE. FT. LAUDERDALE FL 33311  Mailing Address 780 N.W. 27TH AVE. FT. LAUDERDALE FL 33311													
									3. Date Incorporated or Qualified 04/08/1991 3a. Date of Last Report 04/26/1996			eport	
2. Principal	Place of Busi	ness	- ⊢	2a. Mailing Address					4. FEt Number 65-0263326	Applied For Not Applicable			
Suite, Apt	t #, etc.		- 20	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional	
City & Sta	ata	4. *	27	City & State					Fee Required				
23	210		28						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip	Country			Zip			У		8. This corporation has liability for intangible tax under s. 199.032,				
24	25 9. Name and Address of Current			29 30					Florida Statutes X Yes No  10. Name and Address of New Registered Agent				
SK	OLNIK, ARI		ont riegis	atereu A	gent	81	Τ	Name	IV. Name and Address of New He	riator ou /	- Your		
79	0 NW 27 A\	<i>(</i> E.			82	+	Street Addre	ess (P.O. Box Number is Not Acceptab	le)				
FT	LAUDERDA	LE FL 33311					<u> </u>		300 (1.10. 30) (10.10.		<del> </del>		
						83	۱						
						84	I	City		FL	85 Zip (	Code	
11. Pursuan office or agent. I SIGNATURE	am familiar w	sions of Sections 607.0 gent, or both, in the Sta rith, and accept the ob-	igations c	of, Sectio	n 607.0505, F	lorida Statute	s.		oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	urpose of t the app	changing it ointment as	s registered registered	
12.		OFFICERS A				13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		S IN 12	
TITLE	Ab Ab	/ MOALI		☐ DELETE							☐ Change	Addition	
NAME SKOLNIK, NOAH 790 N.W. 27TH AVE				1.2 N				ADDRESS					
CITY - ST - ZIP		DERDALE FL						- ZIP					
T)*LE	P				DELETE	2.1 TITLE		<del></del>			Change	Addition	
NAME	SKOLNII	k, erez 1. 27th ave		2									
STREET ADDRESS		DERDALE FL						ADDRESS					
CITY-ST-ZIP TITLE	111010				DELETE	2. 4 CITY- 3.1 TITLE	·SI	-ZIP		· <u>-</u>	Change	Addition	
NAME					=	3.2 NAME		1				,	
STREET ADDRESS	5					3.3 STREE	T A	ADDRESS					
CITY - ST - ZIP						3.4. CITY-		- 21P					
TITLE					DELETE	4.1 TITLE		J			Change	Addition	
NAME						4 2 NAME							
STREET ADDRESS	i					4 3 STREE							
CITY-ST-ZIP TITLE	<u> </u>				DELETE	4.4 CITY - 5.1 TITLE	S1-	- ZIP			Change	Addition	
NAME						5.2 NAME							
STREET ADDRESS	; [					5.3 STREE		DORESS					
C!TY-ST-ZIP						5.4 CITY -							
TITLE					DELETE	6.1 TITLE				-	Change	Addition	
NAME						6.2 NAME							
STREET ADDRESS	;					6.3 STREE	T AI	DDRESS					
CITY-ST-ZIP						6.4 CITY-	ST-	-ZIP	. 0 ( .				

I do hereby certify that the information supplied with this filling 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 13 or Block 13 if changed, or on an attachment with an address.