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 # S71413

(6)

BARNET AUTO EXPORT, INC.

FILED Apr 24 1997 8:00am Secretary of State

Principal Plac 2124 S.W. 60 V MIRAMAR FL 3	MAY	Mailing Address 2124 S.W. 60 WAY MIRAMAR FL 33023-2942 US				
					3. Date Incorporated or Qualified 08/07/1991	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 21		2a. Mailing Address	28. Mailing Address 26		4. FEI Number 65-0312685	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required
: Clty & State 23		City & State	ł - i - '		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
; Zip	Country 25	7(p) 29	Country 30	,		Yes No
	9. Name and Address of Curr	ent Registered Agent		,	10. Name and Address of New Re	gistered Agent
	'AN & KRAMER, P.A.		81	Name		
7700 NORTH KENDALL DRIVE, SUITE 803			82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)
	'NE H. RASSNER					
MIAI	VII FL 33156		83			
			84	City		85 Zip Code
		00 - 1 002 4000 Fig. 21- 00-0				FL 3 1 1 1 1 1 1 1 1 1
agent La SIGNATURE	m familiar with, and accept the ob-	igations of, Section 607.0505, I	forida Statute	3.	poration submits this statement for the pation's board of directors. I hereby acception's board of directors are the patients and the patients are the patients	DATE
.12.	OFFICERS A	ND DIRECTORS	13.	₇	ADDITIONS/CHANGES TO OFFIC	
AUTLE	BARNET, EFRAIN D		1.1 1111.F			☐ Change ☐ Addition
NAME	20840 SAN SIMEON WAY #	RO1	1.2 NAME	1000000		
STREET ADDRESS	N. MIAMI BEACH FL 33179	the office of the order				
CITY-ST-ZIP	81	DELETE	14 CUY - S 2 1 Trice	1-711		Change Addition
NAME	BARNETT, VIOLET		22 NAME	1		
STREET ADDRESS	1131 NW 199 ST.		23 SIREEL	Anneess		
CITY-ST-ZIP	MIAMI FL 33169	2.4 CITY - ST- 7IP				
TITLE		OELE TE				Change Addition
NAME		•	3.2 NAME	•		
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP		i .	3.4 CHY-	ST-ZIP		
TITLE	DELETE 4.		4.1 1011			Change Addition
NAME			4. 2 NAME		•	
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-\$T-ZIP			4.4 CH1Y - S	1 - 2(P		
TITLE			51 19[4			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP		DELETE	5.4 CITY - S	51 - 71 ²		Change Ladding
TITLE		LJ VILLEIT	6.11111	1		Change Addition
NAME SYREET ADDRESS			6.2 NAME	ADDOLOG		
SINEEL ADDRESS			6.3 STREET	AUURESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Horida 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 eath; 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 changed, or on an attachment with an address.