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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **V44793** (0)

1. Corporation Name
AUTOMUNDO PRODUCTIONS INC.

Principal Place of Business	*Mailing Address*
525 NW 27 AVE STE 204 MIAMI FL 33125 US	525 NW 27 AVE STE 204 MIAMI FL 33125-3038 US

3. Date Incorporated or Qualified: 06/19/1992
3a. Date of Last Report: 03/12/1996

4. FEI Number: 65-0336563 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2960 SW 8TH STREET	26 2960 SW 8TH ST.
22 ~~##~~ 2ND FLR	27 2ND FLR
23 Miami FLA	28 Miami FL.
24 33135	29 33135
25 Country	30 Country

9. Name and Address of Current Registered Agent

KOECHLIN, JORGE J.
~~525 NW 27TH AVE~~
~~#204~~
~~MIAMI FL 33125~~

10. Name and Address of New Registered Agent

81 Name: JORGE KOECHLIN
82 Street Address (P.O. Box Number is Not Acceptable): 2960 SW 8TH STREET
83 2ND FLR
84 City: Miami FL 85 Zip Code: 33135

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 and title if applicable) (NOTE: Registered Agent's signature required when filing online) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☑ Change ☐ Addition
NAME	KOECHLIN, JORGE J	1.2 NAME	
STREET ADDRESS	~~525 NW 27TH AVE #204~~	1.3 STREET ADDRESS	2960 SW 8TH Street 2FLR.
CITY-ST-ZIP	~~MIAMI FL~~	1.4 CITY-ST-ZIP	Miami FL. 33135
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	900002114229
STREET ADDRESS		5.3 STREET ADDRESS	-03/14/97--01104--047
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***165.00
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☑ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

3/14/97

CR2E034 (9/96)

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), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] MARCH 8 1997 JORGE KOECHLIN