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

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Block 12 or Block 13 if change

Jan 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3) V66967 POMPANO AUTO, INC. Principal Place of Business Mailing Address 515 S. DIXIE HIGHWAY EAST - 515-S. DIXIE HIGHWAY EAST POMPANO BEACH FL 33090 POMPANO BEACH FL 03000 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/25/1992 2, Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 9940 KiKA COURT 65-0358898 21 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired # 4022 Fee Required 22 City & State City & State \$5.00 May Be SAN DIEAD 6. Election Campaign Financing CA Trust Fund Contribution 23 Added to Fees 92/29 Žip Country 8. This corporation owes or has paid the current year Intangible 24 Yes ☐ No 25 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THRALL, ROBERT 515 S. DIXIE HIGHWAY EAST Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33060 83 84 City 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 for 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 the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changing its registered agent. I am the first purpose of changi SIGNATURE d name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. \_\_ DELETE Change TITLE 1.1 TITLE THRALL, ROBERT NAME 1.2 NAME CR2E034 9940 KIKA COURT #4022 515 S. DIXIE HIGHWAY E. STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL SAN DIEgo, CA 92129 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE GILLON, DAVID NAME 2.2 NAME 515 S DIXIE HWY., E. STREET ADDRESS 2.3 STREET ADDRESS POMPANO BCH. FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 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 DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 C(TY-ST-ZIP CITY-ST-ZIP 14. I 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 Plack 13 or Plack 14 or Plack 13 or Plack 1

1-16-98

619-578-6077

**FILED**