

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

**FILED**  
**Apr 23 1998 8:00am**  
**Secretary of State**

|  |   |   |
|--|---|---|
| PROFIT CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

**DOCUMENT # P94000019937 (9)**  
 1. Corporation Name  
**CONSUMER AUTOS, INC.**



|  |  |
|--|--|
| Principal Place of Business<br>2430 N. DIXIE HIGHWAY<br>WILTON MANORS FL 33305 | Mailing Address<br>2430 N. DIXIE HIGHWAY<br>WILTON MANORS FL 33305 |
|--|--|

DO NOT WRITE IN THIS SPACE

|  |  |   |  |  |                             |  |
|--|--|---|--|--|-----------------------------|--|
| 2. Principal Place of Business<br>21 2430 N. DIXIE HWY<br>Suite, Apt. #, etc<br>22 same Above<br>City & State<br>23 WILTON MANORS<br>Zip<br>24 33305 Country<br>25 Broward |  | 2a. Mailing Address<br>26 2430 N. DIXIE HWY<br>Suite, Apt. #, etc.<br>27 same Above<br>City & State<br>28 Wilton manors FL<br>Zip<br>29 33305 Country<br>30 Broward |  | 3. Date Incorporated or Qualified<br>03/15/1994  | 4. FEI Number<br>65-0473819 | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/>  |  | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>   |  | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |                             |  |

|  |  |      |  |   |  |                |  |
|--|--|------|--|---|--|----------------|--|
| 9. Name and Address of Current Registered Agent<br>VARGAS, ROSANNE<br>1405 CHAPPARD COURT<br>WELLINGTON W. PALM BEACH FL 33414 |  |      |  | 10. Name and Address of New Registered Agent          |  |                |  |
| 81 Name  |  | None |  | 82 Street Address (P.O. Box Number is Not Acceptable) |  |                |  |
| 83   |  |      |  | 84 City   |  | FL 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, 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 ROSANNE VARGAS DATE 4-6-98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS                     |   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12          |  |
|--|---|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>ANDAR, SHIR M<br>1039 N.E. 17TH AVENUE<br>FORT LAUDERDALE FL 33307 | 1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP | None   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | 4.1 TITLE<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | 5.1 TITLE<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY-ST-ZIP | 0000024990<br>-04/24/98--01018--033<br>***150.00 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | 6.1 TITLE<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SHIR ANDAR DATE 4-6-98

CR2E034 (10/97)