

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000037915 (2)**

1. Corporation Name  
**AUTOMART WHOLESALE, INC.**

97 SEP 18 PM 12:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

97 SEP 18 PM 12  
SECRETARY OF ST.  
TALLAHASSEE, FLO.



Principal Place of Business <b>5130 NW 15TH ST. BAY 6 MARGATE FL 33063 US</b>	Mailing Address <b>P.O. BOX 780232 ORLANDO FL 32878 US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>05/11/1995</b>		3a. Date of Last Report <b>05/01/1996</b>	
4. FEI Number <b>65-0587487</b>		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
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			

2. Principal Place of Business 21 <b>1402 E. Gore St.</b> Suite, Apt. #, etc. 22 <b>Suite 1</b> City & State 23 <b>Orlando, FL</b> Zip 24 <b>32806</b>		2a. Mailing Address 25 <b>1402 E. Gore St.</b> Suite, Apt. #, etc. 27 <b>Suite 1</b> City & State 28 <b>Orlando FL</b> Zip 29 <b>32806</b>		9. Name and Address of Current Registered Agent <b>SUGARMAN, ERIC 1551 CRICKET CLUB CIR., #102 ORLANDO, FL 32525 MARGATE FL 33063</b>		10. Name and Address of New Registered Agent 81 Name <b>Eric Sugarman</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1402 E. Gore St. Ste. 1</b> 83 84 City <b>Orlando</b> FL 85 Zip Code <b>32806</b>	
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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 Eric Sugarman Eric Sugarman DATE 9-15-97  
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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D STURLOWITZ, HAROLD 5130 NW 15TH ST., BAY G MARGATE FL 33063</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>Eric Sugarman, President</b> <b>1402 E. Gore St. Ste. 1</b> <b>Orlando FL 32806</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>300002300633-3</b> <b>-09/23/97-01025-023</b> <b>***165.00 ***165.00</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Eric Sugarman DATE 9-15-97 1401/896-9563

CR2E034 (4/97)

To Whom it may Concern, (2)

My name is Eric Sugarman, President of Automart Wholesale Inc., and I am writing this letter in addition to mailing my check. There was no corporate renewal package previously delivered. Therefore, in accordance with my discussion on the phone with your representative, I am mailing a check for \$165.

Any questions call me at (407) 896-9563

Sincerely,

Eric Sugarman  
Pres.