

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

FILED

May 14 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000090642 (6)
 Corporation Name

ONE STEP AUTOS, INC.



Principal Place of Business		Mailing Address	
5411 PALMER BLVD. SARASOTA FL 34232 34232		5411 PALMER BLVD. SARASOTA FL 34232 34232	
2. Principal Place of Business		2a. Mailing Address	
21 Suite Apt. # etc		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
3. Date Incorporated or Qualified		3a. Date of Last	
11/28/1995			
4. FEI Number		5. Certificate of Status Desired	
65-062-8494		<input type="checkbox"/> \$8.75 Fee	
6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 Add	
8. This corporation has liability for intangible tax under Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PUGH, WILLIAM H JR 5411 PALMER ROAD SARASOTA FL 34232 SARASOTA, FL 34232				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85			

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 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 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 signature required when re-filing) 247

12 OFFICERS AND DIRECTORS		13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PRESIDENT <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Other
NAME	PUGH, WILLIAM H., JR.	12 NAME	
STREET ADDRESS	5411 PALMER BLVD	13 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA, FL 34232	14 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Other
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Other
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Other
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Other
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	000002191380
CITY - ST - ZIP		54 CITY - ST - ZIP	-05/27/97--01039--050
TITLE	<input type="checkbox"/> DELETE	61 TITLE	***165.00
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.27, 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 force and 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. If my name appears in Block 12 or Block 13 if changed, or on an attachment with an address...

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 5/14/97