

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

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P98000065372

1. Corporation Name
4 POINTS AUTO SALES, INC.

Principal Place of Business: **3489-B SOUTH MONROE STREET TALLAHASSEE FL 32301**

Mailing Address: **3489-B SOUTH MONROE STREET TALLAHASSEE FL 32301**

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
25. Country	30. Country

9. Name and Address of Current Registered Agent

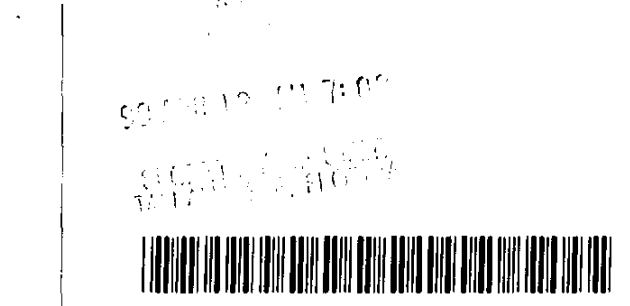
MORRISON, J. KENNETH
3489-B SOUTH MONROE STREET
TALLAHASSEE FL 32301

81. Name
 82. Street Address (P.O. Box Numbers 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: *J. Kenneth Morrison* **J. KENNETH MORRISON, REGISTERED AGENT/PVTSD** 04/12/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	[] DELETE	11 TITLE	[] Change [X] Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE	[] DELETE	21 TITLE	[] Change [] Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	[] DELETE	31 TITLE	[] Change [] Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	[] DELETE	41 TITLE	[] Change [] Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	[] DELETE	51 TITLE	[] Change [] Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	[] DELETE	61 TITLE	[] Change [] Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/24/1998**

4. FEI Number: **59-3526135** 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 owes the current year Intangible Personal Property Tax: Yes [] No

10. Name and Address of New Registered Agent

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

P, V, T, S, D [] Change [X] Addition

J. KENNETH MORRISON

3489-B SOUTH MONROE STREET

TALLAHASSEE, FL 32301

590002840875--0
 -04/15/99--01099--025
 ****150.00 ****150.00

[] Change [] Addition

04/12/99

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other like empowered.

SIGNATURE: *J. Kenneth Morrison* **J. KENNETH MORRISON** 04/12/99 (850) 656-6292

CR2E034 (11/98)