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CO	PROFIT - RPORATION UAL REPORT	Sandra E Secreta	RTMENT OF STATE 3. Mortham ry of State	FILED 1997 OCT 28 PH 12: 53	
mr	1997 \$61.25 IMENT # 6 460 Auto Dummer Daylona Do	162 e of South	CORPORATIONS	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Plai	co of Business S. R. dyewr L. DANYONA Pr	Mailing Address	(5m	3. Date Incorporated or Qualified 3a. Date of Last Report	
	Place of Business	2a. Mailing Address	howa	4. FEI Number Applied For Not Applied by Applied For	 c
Suite, Apt	.#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Sta	lo	City & Slale		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes XY Yes No	
h.n	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered Agent	7
	5. Rifecuno	1 Am	82 Street	Address (P.O. Box Number is Not Acceptable)	
smt	L DAYTONA, P	32019	83 84 City	B5 Zip Code	_
11. Pursuant office or	to the provisions of Sections 607.05 registered agent, or both, in the Sta	502 and 607.1508, Florida Statute te of Florida, Such change was a	es, the above-named authorized by the corp	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered	i
agent. i a	am iamiliar with, and accept the obil	igations of Section 507.0505, Fig	rida Statutes.		
SIGNATURE		nceall		10.22.97	
12.	Stignature typed or printed name of registered a OFFICERS A	McJaul agent and title if applicable (NOTE ND DIRECTORS	Registered Agent signature	required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	Signaluro typed or printed name of registered a	MCGAUL agont and little if applicable (NOTE	Progistered Agent signature	10.22.97 required when reinstalling) DATE	(96/6)
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APPROVED FILESHOUNG FILLINGS FEEK ANTARR ANNOW AND SCORE AND MENDED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT 1997 OCT 28 PH 12: 53 Secretary of State 1997 \$61.25 DIVISION OF CORPORATIONS SECRETARY OF STATE
TALLAHASSEE FLORIDA DOCUMENT #646062 Mr Auto Dusurance of South Daylona, Dr. Principal Place of Business Mailing Address 2305 S. Ridgewood Ave South DANJONA Pl 32019 3. Date Incorporated or Qualified 3a. Date of Last Report 1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Ar Shown No sha 59-1920180 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & Slale 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes ☐ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 2305 5. Rifewood Ave 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA, Pl 32019 83 84 City 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

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NOTE:

NOTE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change Addition 1.1 THILE MAKU i) NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY - S1 - ZIP TITLE 21 TITLE e cretary NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-S1-ZIP 700002334187 Addition DELETE TITLE 3 1 TITLE 32 NAME 10/30/97--01089--004 STREET ADDRESS 33 STREET ADDRESS ******61.25 CITY ST-ZIP 3 4. CITY - ST - ZIP TITES DELETE Change Addition 411016 NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1.1(T) F Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELFTE TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CDY-ST-ZIP 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.

10.22.97