2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: 4

A28700 DOCUMENT # FILED 1. Entity Name BLACKJACK AUTO SALVAGE, LIMITED 2003 APR 23 AM 9: 15. Principal Place of Business Mailing Address DIVIJION OF CORPORATIONS 12301 40TH STREET NORTH P.O. BOX 1954 TALLAHASSEE, FLORIDA CLEARWATER FL 34622 ST. PETERSBURG FL 33731 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** Applied For City & State City & State 4. FEI Number 59-2969596 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FISCHER, H. JAMES Street Address (P.O. Box Number is Not Acceptable) 721 FIRST AVENUE NORTH ST. PETERSBURG FL 33701 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$108,472.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY CR2E003 (10/02) DOCHMENT # V52156 STREET ADDRESS AUTOWORTH, INC. NAME STREET ADDRESS 721 FIRST AVE. N. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33701 400015814084 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP .CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

Autoworth, Inc., General Partner

QUIREBy: Worth T. Blackwell