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.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sangra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT** # F47806 (7) USED CAR WORLD, INC. Principal Place of Business Mailing Address 1816 AURORA RD 1816 AURORA RD MELBOURNE FL 32935 MELBOURNE FL 32935 US 3. Date Incorporated or Qualified 3a. Date of Last Report 10/07/1981 07/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2130537 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 22 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Zio 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 **VONTAIGE, RICHARD** 4244 SPARROW HAWK RD. Street Address (P.O. Box Number is Not Acceptable) 82 MELBOURNE FL 32934 83 84 Mélbourne Zip Code 32935 11. Pursuant to the provisions of Sections 607,0502 and 607,1608, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familial with and accept the objections of Section 607,0505, Florida Statutes. SIGNATURE (NOTE Transperred Agent signature required when he estating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)TITLE TSPV DELETE 1.1 117:18 Change Addition NAME VONTALGEL, RICHARD 1.2 NAME CR2E034 STREET ADDRESS 1816 AURORA RD 13 STREET ADDRESS MELBOURNE, FL 00000 CITY-ST-ZIP 1 4 CITY -ST-ZIP TITLE DELETE 2.1 HH F Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-SI-ZIP 2 4 CITY - S! - ZIP TIFLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST-ZIP 3.4. CHY - ST - 7IP TITLE DELETE 4.1 THILE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 ! TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 City - ST - ZiP DILE DELETE 6 1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6 3 STREET ADORESS CITY - ST - ZIP 6 4 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 119.07(3)(k). Florida Statutos 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 office or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutos, and that my name appears in Block 12 or Block 13 if granged, or oxian attachment with an address. SIGNATURE

URE AND TYPED OR PRINTED NAME BE SIGNING OFFICER OR DIRECTOR