

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

FILED
Feb 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F92000000842 (6)**

1. Corporation Name

AMITY NISSAN OF MASSAPEQUA, LTD., INC.



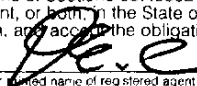
Principal Place of Business 645 SOUTH MILITARY TRAIL SUITE 6 WEST PALM BEACH FL 33415	Mailing Address 645 SOUTH MILITARY TRAIL SUITE 6 WEST PALM BEACH FL 33415-0983
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2. Principal Place of Business 21 551 S. Military Trail Suite, Apt. #, etc. 22 City & State, 23 West Palm Beach, FL. Zip 24 33415 Country 25 USA		2a. Mailing Address 26 551 S. Military Trail Suite, Apt. #, etc. 27 City & State 28 West Palm Beach, FL. Zip 29 33415 Country 30 USA		3. Date Incorporated or Qualified 12/22/1992	3a. Date of Last Report 04/15/1996
		4. FEI Number 11-2428171		Applied For Not Applicable	
		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent THOMPSON, DOUGLAS E 645 SOUTH MILITARY TRAIL SUITE 6 WEST PALM BEACH FL 33415				10. Name and Address of New Registered Agent	
				81 Name SAME	
				82 Street Address (P.O. Box Number is Not Acceptable) 4524 Gun Club Rd., Suite 101	
				83	
				84 City West Palm Beach	
				85 Zip Code FL 33415	

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


Signature, typed or printed name of registered agent and title if applicable.

Douglas E. Thompson

01/14/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	
NAME	STALUPPI, JOHN	1.2 NAME	
STREET ADDRESS	551 SOUTH MILITARY TRAIL	1.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33415	1.4 CITY - ST - ZIP	
TITLE	S	2.1 TITLE	
NAME	STALUPPI, JEANETTE	2.2 NAME	
STREET ADDRESS	551 SOUTH MILITARY TRAIL	2.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33415	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - 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.

John Staluppi, Pres.

01/14/97

(561) 683-7100

CR2E034 (9/96)