


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 # **F93000000116 (4)**

1. Corporation Name
WESTBURY TOYOTA, 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 33415-0900
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3. Date Incorporated or Qualified 12/22/1992	3a. Date of Last Report 04/15/1996
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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 Country 24 33415 25 USA	2a. Mailing Address 26 551 S. Military Trail Suite, Apt. #, etc. 27 City & State 28 West Palm Beach, FL Zip Country 29 33415 30 USA
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4. FEI Number 11-2983989	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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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 FL 85 Zip Code 33415
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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 	Douglas E. Thompson	01/14/97
Signature typed or printed name of registered agent and title, if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

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