

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

FILED

May 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H75214** (7)

1. Corporation Name  
**KING MOTOR COMPANY OF NORTH BROWARD**



Principal Place of Business <b>4230 N FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064</b>	Mailing Address <b>4230 N FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064-6049</b>
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3. Date Incorporated or Qualified <b>09/04/1985</b>	3a. Date of Last Report <b>03/05/1996</b>
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2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26 700-900 E. Sunrise Blvd</b>	4. FEI Number <b>59-2605809</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State <b>23 Ft. Lauderdale, FL</b>	City & State <b>27 Ft. Lauderdale, FL</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>24 33304</b>	Country <b>25 US</b>	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

**MAYO, ROBERT  
900 E SUNRISE BLVD  
FT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81 Name <b>A. Edward Appleby</b>	85 Zip Code <b>33064</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>4230 N. Federal Hwy.</b>	
83	
84 City <b>Lighthouse Point</b>	FL

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: **A. Edward Appleby** DATE: **4-28-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>P, D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KING, LOUIS W.</b>		1.2 NAME	
STREET ADDRESS <b>3019 N.E. 21ST ST.</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>FT. LAUDERDALE FL</b>		1.4 CITY-ST-ZIP	
TITLE <b>V</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>V, D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>APPLEBY, EDWARD</b>		2.2 NAME	
STREET ADDRESS <b>4250 N FEDERAL HIGHWAY</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>LIGHTHOUSE POINT FL</b>		2.4 CITY-ST-ZIP	
TITLE <b>S</b>	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>V, D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>MAYO, ROBERT</b>		3.2 NAME <b>W. Chy King</b>	
STREET ADDRESS <b>900 E SUNRISE BLVD</b>		3.3 STREET ADDRESS <b>700-900 E. Sunrise Blvd.</b>	
CITY-ST-ZIP <b>FT LAUDERDALE FL</b>		3.4 CITY-ST-ZIP <b>Ft. Lauderdale, FL 33304</b>	
TITLE <b>T</b>	<input type="checkbox"/> DELETE	4.1 TITLE <b>V, T</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>FRANCIS, KIRK</b>		4.2 NAME	
STREET ADDRESS <b>900 E SUNRISE BLVD</b>		4.3 STREET ADDRESS	
CITY-ST-ZIP <b>FT LAUDERDALE FL</b>		4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		5.1 TITLE <b>V, S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME <b>Gonzalez, Frank C.</b>	
STREET ADDRESS		5.3 STREET ADDRESS <b>700-900 E. Sunrise Blvd.</b>	
CITY-ST-ZIP		5.4 CITY-ST-ZIP <b>Ft. Lauderdale, FL 33304</b>	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <b>V</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME <b>Gale, Jeffrey M.</b>	
STREET ADDRESS		6.3 STREET ADDRESS <b>700-900 E. Sunrise Blvd.</b>	
CITY-ST-ZIP		6.4 CITY-ST-ZIP <b>Ft. Lauderdale, FL 33304</b>	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: **Frank C. Gonzalez** DATE: **4-28-97** (954) 941-5880

CR2E034 (9/96)