FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **H87509** **(6)**

1. Corporation Name

AUTO-MATCH INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
6900 BEACH BLVD. JACKSONVILLE FL 32216	6900 BEACH BLVD. JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/02/1985**

3a. Date of Last Report: **04/13/1994**

4. FEI Number: **59-3017146** [ ] Applied For [ ] Not Applicable

2. Principal Place of Business (21–25) / 2a. Mailing Address (26–30): Suite, Apt. #, etc.; City & State; Zip; Country

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BLACKBURN, BRYAN E.	81 Name
1921 DEWEY PLACE	82 Street Address (P.O. Box Number is Not Acceptable)
	83
JACKSONVILLE FL 32207	84 City **FL** 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 617.0502, 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

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	ROE, PATRICK L.
STREET ADDRESS	970 FRUIT COVE DRIVE
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	D
NAME	ROE, PATRICK L.
STREET ADDRESS	970 FRUIT COVE DRIVE
CITY-ST-ZIP	JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 [ ] Change [ ] Addition

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(1), 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: Patrick L. Roe 5/3/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0018123 CP