

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION ANNUAL REPORT 1996
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # **P33731 (1)**
 1. Corporation Name
PLS AUTO FINANCING COPORATION



Principal Place of Business: **100 N.W. 12TH AVENUE C/O TAX DEPARTMENT DEERFIELD BEACH FL 33442 US**
 Mailing Address: **100 N.W. 12TH AVENUE LEGAL DEPT DEERFIELD BEACH FL 33442 US**

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip
 24 Country
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3. Date Incorporated or Qualified: **04/29/1991**
 3a. Date of Last Report: **05/01/1995**
 4. FEI Number: **52-1724977**
 Applied For: Not Applicable
 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 No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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: _____ DATE: _____
 Signature typed or printed name of registered agent and not applicable: _____ (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICH, LAWRENCE S	1.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORAN, PATRICIA G	2.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NIXON, MICHAEL	3.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	EVGC	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, COLIN	4.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, A TUCKER	5.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHELAN, JOHN J	6.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH FL	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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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 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: *John J Whelan Secretary* 3/30/96 (954) 429-2010
 SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)

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PLS AUTO FINANCING CORPORATION

Rev: 2/26/96

LIST OF OFFICERS & DIRECTORS

TITLE NAME ADDRESS CITY, STATE ZIP CODE	P Smith, Daryl 100 N.W. 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	C/D Rich, Lawrence S. 100 NW 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	EV/GC Brown, Colin 100 NW 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE, ZIP CODE	S Whelan, John J. 100 NW 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	T Allen, A. Tucker 100 NW 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	AS/AT Browdy, Alan J. 100 N.W. 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	AT Ossenbeck, Patrick C. 100 N.W. 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	D Moran, Patricia G. 100 NW 12th Ave. Deerfield Beach, FL 33442
TITLE NAME ADDRESS CITY, STATE ZIP CODE	D Shapiro, Jeffrey B. 801 Brickell Avenue, Suite 1501 Miami, FL 33131

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PLS Financing Corporation
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Add'l Officers and Directors

TITLE
NAME
ADDRESS
CITY, STATE ZIP CODE

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Wheeler, Christopher C.
2255 Glades Rd., Suite 340 West
Boca Raton, FL 33431-7360